

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$80,693,000	\$68,128,000	(\$12,565,000)	-16%
2	Short Term Investments	\$276,000	\$30,119,000	\$29,843,000	10813%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$59,828,000	\$64,792,000	\$4,964,000	8%
4	Current Assets Whose Use is Limited for Current Liabilities	\$5,510,000	\$8,511,000	\$3,001,000	54%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$2,592,000	\$2,554,000	(\$38,000)	-1%
7	Inventories of Supplies	\$4,780,000	\$5,408,000	\$628,000	13%
8	Prepaid Expenses	\$4,071,000	\$5,038,000	\$967,000	24%
9	Other Current Assets	\$159,000	\$159,000	\$0	0%
	Total Current Assets	\$157,909,000	\$184,709,000	\$26,800,000	17%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$1,357,000	\$243,826,000	\$242,469,000	17868%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$26,675,000	\$26,075,000	(\$600,000)	-2%
	Total Noncurrent Assets Whose Use is Limited:	\$28,032,000	\$269,901,000	\$241,869,000	863%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$35,851,000	\$39,373,000	\$3,522,000	10%
7	Other Noncurrent Assets	\$14,156,000	\$48,833,000	\$34,677,000	245%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$534,502,000	\$547,904,000	\$13,402,000	3%
2	Less: Accumulated Depreciation	\$313,648,000	\$339,669,000	\$26,021,000	8%
	Property, Plant and Equipment, Net	\$220,854,000	\$208,235,000	(\$12,619,000)	-6%
3	Construction in Progress	\$21,659,000	\$47,044,000	\$25,385,000	117%
	Total Net Fixed Assets	\$242,513,000	\$255,279,000	\$12,766,000	5%
	Total Assets	\$478,461,000	\$798,095,000	\$319,634,000	67%

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		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$47,334,000	\$61,934,000	\$14,600,000	31%
2	Salaries, Wages and Payroll Taxes	\$9,025,000	\$10,044,000	\$1,019,000	11%
3	Due To Third Party Payers	\$5,424,000	\$7,600,000	\$2,176,000	40%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$5,018,000	\$5,416,000	\$398,000	8%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$15,683,000	\$17,731,000	\$2,048,000	13%
	Total Current Liabilities	\$82,484,000	\$102,725,000	\$20,241,000	25%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$130,025,000	\$379,180,000	\$249,155,000	192%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$130,025,000	\$379,180,000	\$249,155,000	192%
3	Accrued Pension Liability	\$91,954,000	\$109,714,000	\$17,760,000	19%
4	Other Long Term Liabilities	\$38,799,000	\$45,462,000	\$6,663,000	17%
	Total Long Term Liabilities	\$260,778,000	\$534,356,000	\$273,578,000	105%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$108,504,000	\$120,895,000	\$12,391,000	11%
2	Temporarily Restricted Net Assets	\$18,662,000	\$32,086,000	\$13,424,000	72%
3	Permanently Restricted Net Assets	\$8,033,000	\$8,033,000	\$0	0%
	Total Net Assets	\$135,199,000	\$161,014,000	\$25,815,000	19%
	Total Liabilities and Net Assets	\$478,461,000	\$798,095,000	\$319,634,000	67%

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,459,332,537	\$1,642,590,508	\$183,257,971	13%
2	Less: Allowances	\$967,141,721	\$1,102,925,843	\$135,784,122	14%
3	Less: Charity Care	\$27,344,589	\$34,807,821	\$7,463,232	27%
4	Less: Other Deductions	(\$10,412,752)	\$0	\$10,412,752	-100%
	Total Net Patient Revenue	\$475,258,979	\$504,856,844	\$29,597,865	6%
5	Other Operating Revenue	\$20,325,664	\$23,113,722	\$2,788,058	14%
6	Net Assets Released from Restrictions	\$2,397,063	\$1,268,414	(\$1,128,649)	-47%
	Total Operating Revenue	\$497,981,706	\$529,238,980	\$31,257,274	6%
B. Operating Expenses:					
1	Salaries and Wages	\$172,457,467	\$176,514,422	\$4,056,955	2%
2	Fringe Benefits	\$49,038,333	\$50,255,930	\$1,217,597	2%
3	Physicians Fees	\$12,206,630	\$10,555,932	(\$1,650,698)	-14%
4	Supplies and Drugs	\$51,109,776	\$60,098,042	\$8,988,266	18%
5	Depreciation and Amortization	\$27,314,964	\$26,236,169	(\$1,078,795)	-4%
6	Bad Debts	\$47,360,053	\$51,939,073	\$4,579,020	10%
7	Interest	\$5,545,081	\$5,640,878	\$95,797	2%
8	Malpractice	\$9,439,125	\$6,493,306	(\$2,945,819)	-31%
9	Other Operating Expenses	\$87,009,236	\$94,390,849	\$7,381,613	8%
	Total Operating Expenses	\$461,480,665	\$482,124,601	\$20,643,936	4%
	Income/(Loss) From Operations	\$36,501,041	\$47,114,379	\$10,613,338	29%
C. Non-Operating Revenue:					
1	Income from Investments	\$456,342	\$464,217	\$7,875	2%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$404,832)	\$1,257,236	\$1,662,068	-411%
	Total Non-Operating Revenue	\$51,510	\$1,721,453	\$1,669,943	3242%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$36,552,551	\$48,835,832	\$12,283,281	34%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$537,439	(\$24,468)	(\$561,907)	-105%
	All Other Adjustments	(\$367,563)	(\$11,794,512)	(\$11,426,949)	3109%
	Total Other Adjustments	\$169,876	(\$11,818,980)	(\$11,988,856)	-7057%
	Excess/(Deficiency) of Revenue Over Expenses	\$36,722,427	\$37,016,852	\$294,425	1%
	Principal Payments	\$4,576,000	\$4,939,000	\$363,000	8%

**STAMFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$233,171,009	\$246,939,534	\$13,768,525	6%
2	MEDICARE MANAGED CARE	\$40,973,521	\$41,651,004	\$677,483	2%
3	MEDICAID	\$64,190,906	\$91,250,475	\$27,059,569	42%
4	MEDICAID MANAGED CARE	\$24,897,411	\$6,000,669	(\$18,896,742)	-76%
5	CHAMPUS/TRICARE	\$1,000,373	\$891,400	(\$108,973)	-11%
6	COMMERCIAL INSURANCE	\$59,011,852	\$54,364,985	(\$4,646,867)	-8%
7	NON-GOVERNMENT MANAGED CARE	\$143,742,535	\$136,760,590	(\$6,981,945)	-5%
8	WORKER'S COMPENSATION	\$7,109,125	\$4,873,432	(\$2,235,693)	-31%
9	SELF- PAY/UNINSURED	\$19,215,996	\$18,193,219	(\$1,022,777)	-5%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$2,840,581	\$3,060,763	\$220,182	8%
	TOTAL INPATIENT GROSS REVENUE	\$596,153,309	\$603,986,071	\$7,832,762	1%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$219,686,477	\$267,737,797	\$48,051,320	22%
2	MEDICARE MANAGED CARE	\$38,964,061	\$52,352,415	\$13,388,354	34%
3	MEDICAID	\$44,096,500	\$106,884,643	\$62,788,143	142%
4	MEDICAID MANAGED CARE	\$48,923,744	\$13,612,576	(\$35,311,168)	-72%
5	CHAMPUS/TRICARE	\$656,717	\$825,552	\$168,835	26%
6	COMMERCIAL INSURANCE	\$128,138,535	\$143,671,422	\$15,532,887	12%
7	NON-GOVERNMENT MANAGED CARE	\$319,080,042	\$372,956,686	\$53,876,644	17%
8	WORKER'S COMPENSATION	\$8,077,098	\$9,042,970	\$965,872	12%
9	SELF- PAY/UNINSURED	\$54,022,199	\$69,865,798	\$15,843,599	29%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,533,842	\$1,654,578	\$120,736	8%
	TOTAL OUTPATIENT GROSS REVENUE	\$863,179,215	\$1,038,604,437	\$175,425,222	20%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$452,857,486	\$514,677,331	\$61,819,845	14%
2	MEDICARE MANAGED CARE	\$79,937,582	\$94,003,419	\$14,065,837	18%
3	MEDICAID	\$108,287,406	\$198,135,118	\$89,847,712	83%
4	MEDICAID MANAGED CARE	\$73,821,155	\$19,613,245	(\$54,207,910)	-73%
5	CHAMPUS/TRICARE	\$1,657,090	\$1,716,952	\$59,862	4%
6	COMMERCIAL INSURANCE	\$187,150,387	\$198,036,407	\$10,886,020	6%
7	NON-GOVERNMENT MANAGED CARE	\$462,822,577	\$509,717,276	\$46,894,699	10%
8	WORKER'S COMPENSATION	\$15,186,223	\$13,916,402	(\$1,269,821)	-8%
9	SELF- PAY/UNINSURED	\$73,238,195	\$88,059,017	\$14,820,822	20%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$4,374,423	\$4,715,341	\$340,918	8%
	TOTAL GROSS REVENUE	\$1,459,332,524	\$1,642,590,508	\$183,257,984	13%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$57,283,298	\$57,399,785	\$116,487	0%
2	MEDICARE MANAGED CARE	\$8,092,454	\$8,973,305	\$880,851	11%
3	MEDICAID	\$9,077,783	\$16,458,289	\$7,380,506	81%
4	MEDICAID MANAGED CARE	\$4,356,150	\$891,172	(\$3,464,978)	-80%
5	CHAMPUS/TRICARE	\$248,767	\$163,645	(\$85,122)	-34%
6	COMMERCIAL INSURANCE	\$21,674,312	\$18,317,896	(\$3,356,416)	-15%
7	NON-GOVERNMENT MANAGED CARE	\$53,256,179	\$46,449,848	(\$6,806,331)	-13%
8	WORKER'S COMPENSATION	\$5,608,201	\$3,327,953	(\$2,280,248)	-41%
9	SELF- PAY/UNINSURED	\$237,449	\$284,223	\$46,774	20%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$188,215	\$353,408	\$165,193	88%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL INPATIENT NET REVENUE	\$160,022,808	\$152,619,524	(\$7,403,284)	-5%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$30,140,662	\$37,924,429	\$7,783,767	26%
2	MEDICARE MANAGED CARE	\$5,675,116	\$7,772,699	\$2,097,583	37%
3	MEDICAID	\$6,179,165	\$17,497,761	\$11,318,596	183%
4	MEDICAID MANAGED CARE	\$8,465,939	\$1,972,687	(\$6,493,252)	-77%
5	CHAMPUS/TRICARE	\$123,693	\$195,119	\$71,426	58%
6	COMMERCIAL INSURANCE	\$62,112,546	\$65,890,055	\$3,777,509	6%
7	NON-GOVERNMENT MANAGED CARE	\$146,624,616	\$171,815,442	\$25,190,826	17%
8	WORKER'S COMPENSATION	\$5,978,543	\$6,144,198	\$165,655	3%
9	SELF- PAY/UNINSURED	\$1,800,846	\$1,726,343	(\$74,503)	-4%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$149,887	\$230,800	\$80,913	54%
	TOTAL OUTPATIENT NET REVENUE	\$267,251,013	\$311,169,533	\$43,918,520	16%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$87,423,960	\$95,324,214	\$7,900,254	9%
2	MEDICARE MANAGED CARE	\$13,767,570	\$16,746,004	\$2,978,434	22%
3	MEDICAID	\$15,256,948	\$33,956,050	\$18,699,102	123%
4	MEDICAID MANAGED CARE	\$12,822,089	\$2,863,859	(\$9,958,230)	-78%
5	CHAMPUS/TRICARE	\$372,460	\$358,764	(\$13,696)	-4%
6	COMMERCIAL INSURANCE	\$83,786,858	\$84,207,951	\$421,093	1%
7	NON-GOVERNMENT MANAGED CARE	\$199,880,795	\$218,265,290	\$18,384,495	9%
8	WORKER'S COMPENSATION	\$11,586,744	\$9,472,151	(\$2,114,593)	-18%
9	SELF- PAY/UNINSURED	\$2,038,295	\$2,010,566	(\$27,729)	-1%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$338,102	\$584,208	\$246,106	73%
	TOTAL NET REVENUE	\$427,273,821	\$463,789,057	\$36,515,236	9%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	4,542	4,387	(155)	-3%
2	MEDICARE MANAGED CARE	709	757	48	7%
3	MEDICAID	1,867	2,898	1,031	55%
4	MEDICAID MANAGED CARE	1,172	191	(981)	-84%
5	CHAMPUS/TRICARE	16	14	(2)	-13%
6	COMMERCIAL INSURANCE	1,551	1,538	(13)	-1%
7	NON-GOVERNMENT MANAGED CARE	4,420	3,964	(456)	-10%
8	WORKER'S COMPENSATION	76	62	(14)	-18%
9	SELF- PAY/UNINSURED	479	399	(80)	-17%
10	SAGA	0	0	0	0%
11	OTHER	108	84	(24)	-22%
	TOTAL DISCHARGES	14,940	14,294	(646)	-4%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	28,672	27,665	(1,007)	-4%
2	MEDICARE MANAGED CARE	4,655	4,356	(299)	-6%
3	MEDICAID	9,780	12,977	3,197	33%
4	MEDICAID MANAGED CARE	4,106	793	(3,313)	-81%
5	CHAMPUS/TRICARE	65	61	(4)	-6%
6	COMMERCIAL INSURANCE	6,616	6,249	(367)	-6%
7	NON-GOVERNMENT MANAGED CARE	17,540	16,221	(1,319)	-8%
8	WORKER'S COMPENSATION	574	308	(266)	-46%
9	SELF- PAY/UNINSURED	1,752	1,874	122	7%
10	SAGA	0	0	0	0%
11	OTHER	682	407	(275)	-40%
	TOTAL PATIENT DAYS	74,442	70,911	(3,531)	-5%
C.	OUTPATIENT VISITS				

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(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	MEDICARE TRADITIONAL	67,412	73,851	6,439	10%
2	MEDICARE MANAGED CARE	12,540	14,976	2,436	19%
3	MEDICAID	16,046	42,929	26,883	168%
4	MEDICAID MANAGED CARE	28,081	7,238	(20,843)	-74%
5	CHAMPUS/TRICARE	275	285	10	4%
6	COMMERCIAL INSURANCE	53,739	51,462	(2,277)	-4%
7	NON-GOVERNMENT MANAGED CARE	135,115	144,162	9,047	7%
8	WORKER'S COMPENSATION	2,139	2,320	181	8%
9	SELF- PAY/UNINSURED	21,844	22,803	959	4%
10	SAGA	0	0	0	0%
11	OTHER	912	397	(515)	-56%
	TOTAL OUTPATIENT VISITS	338,103	360,423	22,320	7%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$37,091,351	\$47,620,524	\$10,529,173	28%
2	MEDICARE MANAGED CARE	\$5,785,594	\$9,038,166	\$3,252,572	56%
3	MEDICAID	\$17,584,243	\$44,126,218	\$26,541,975	151%
4	MEDICAID MANAGED CARE	\$21,238,306	\$5,846,696	(\$15,391,610)	-72%
5	CHAMPUS/TRICARE	\$207,024	\$319,890	\$112,866	55%
6	COMMERCIAL INSURANCE	\$21,242,341	\$28,064,934	\$6,822,593	32%
7	NON-GOVERNMENT MANAGED CARE	\$43,030,186	\$52,151,503	\$9,121,317	21%
8	WORKER'S COMPENSATION	\$2,601,475	\$3,342,466	\$740,991	28%
9	SELF- PAY/UNINSURED	\$24,740,788	\$30,587,653	\$5,846,865	24%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$1,050,542	\$1,384,316	\$333,774	32%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$174,571,850	\$222,482,366	\$47,910,516	27%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$5,051,103	\$5,489,219	\$438,116	9%
2	MEDICARE MANAGED CARE	\$812,581	\$1,375,633	\$563,052	69%
3	MEDICAID	\$1,949,234	\$4,517,129	\$2,567,895	132%
4	MEDICAID MANAGED CARE	\$2,518,915	\$219,281	(\$2,299,634)	-91%
5	CHAMPUS/TRICARE	\$35,329	\$43,534	\$8,205	23%
6	COMMERCIAL INSURANCE	\$12,073,442	\$15,431,118	\$3,357,676	28%
7	NON-GOVERNMENT MANAGED CARE	\$21,115,511	\$27,381,864	\$6,266,353	30%
8	WORKER'S COMPENSATION	\$2,048,327	\$2,567,818	\$519,491	25%
9	SELF- PAY/UNINSURED	\$316,351	\$305,471	(\$10,880)	-3%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$7,607	\$175,867	\$168,260	2212%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$45,928,400	\$57,506,934	\$11,578,534	25%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	5,512	6,185	673	12%
2	MEDICARE MANAGED CARE	846	1,158	312	37%
3	MEDICAID	4,001	11,048	7,047	176%
4	MEDICAID MANAGED CARE	8,088	2,117	(5,971)	-74%
5	CHAMPUS/TRICARE	57	60	3	5%
6	COMMERCIAL INSURANCE	4,793	5,029	236	5%
7	NON-GOVERNMENT MANAGED CARE	9,590	9,877	287	3%
8	WORKER'S COMPENSATION	909	891	(18)	-2%
9	SELF- PAY/UNINSURED	6,250	6,528	278	4%
10	SAGA	0	0	0	0%
11	OTHER	270	296	26	10%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	40,316	43,189	2,873	7%

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REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
I.	<u>OPERATING EXPENSE BY CATEGORY</u>				
A.	<u>Salaries & Wages:</u>				
1	Nursing Salaries	\$55,671,919	\$55,627,968	(\$43,951)	0%
2	Physician Salaries	\$21,556,196	\$22,560,307	\$1,004,111	5%
3	Non-Nursing, Non-Physician Salaries	\$95,229,352	\$98,326,147	\$3,096,795	3%
	Total Salaries & Wages	\$172,457,467	\$176,514,422	\$4,056,955	2%
B.	<u>Fringe Benefits:</u>				
1	Nursing Fringe Benefits	\$14,949,296	\$15,837,999	\$888,703	6%
2	Physician Fringe Benefits	\$4,771,010	\$6,423,210	\$1,652,200	35%
3	Non-Nursing, Non-Physician Fringe Benefits	\$29,318,027	\$27,994,721	(\$1,323,306)	-5%
	Total Fringe Benefits	\$49,038,333	\$50,255,930	\$1,217,597	2%
C.	<u>Contractual Labor Fees:</u>				
1	Nursing Fees	\$588,465	\$1,548,455	\$959,990	163%
2	Physician Fees	\$12,206,630	\$10,555,932	(\$1,650,698)	-14%
3	Non-Nursing, Non-Physician Fees	\$26,347,822	\$24,813,394	(\$1,534,428)	-6%
	Total Contractual Labor Fees	\$39,142,917	\$36,917,781	(\$2,225,136)	-6%
D.	<u>Medical Supplies and Pharmaceutical Cost:</u>				
1	Medical Supplies	\$34,711,125	\$36,197,616	\$1,486,491	4%
2	Pharmaceutical Costs	\$16,398,651	\$23,900,426	\$7,501,775	46%
	Total Medical Supplies and Pharmaceutical Cost	\$51,109,776	\$60,098,042	\$8,988,266	18%
E.	<u>Depreciation and Amortization:</u>				
1	Depreciation-Building	\$22,136,239	\$21,410,376	(\$725,863)	-3%
2	Depreciation-Equipment	\$5,178,725	\$4,825,793	(\$352,932)	-7%
3	Amortization	\$0	\$0	\$0	0%
	Total Depreciation and Amortization	\$27,314,964	\$26,236,169	(\$1,078,795)	-4%
F.	<u>Bad Debts:</u>				
1	Bad Debts	\$47,360,053	\$51,939,073	\$4,579,020	10%
G.	<u>Interest Expense:</u>				
1	Interest Expense	\$5,545,081	\$5,640,878	\$95,797	2%
H.	<u>Malpractice Insurance Cost:</u>				
1	Malpractice Insurance Cost	\$9,439,125	\$6,493,306	(\$2,945,819)	-31%
I.	<u>Utilities:</u>				
1	Water	\$140,486	\$159,797	\$19,311	14%
2	Natural Gas	\$1,443,323	\$1,210,863	(\$232,460)	-16%
3	Oil	\$2,477	\$4,851	\$2,374	96%
4	Electricity	\$2,555,795	\$3,289,209	\$733,414	29%
5	Telephone	\$1,041,714	\$1,387,462	\$345,748	33%
6	Other Utilities	\$226,398	\$264,413	\$38,015	17%
	Total Utilities	\$5,410,193	\$6,316,595	\$906,402	17%
J.	<u>Business Expenses:</u>				
1	Accounting Fees	\$387,725	\$368,933	(\$18,792)	-5%
2	Legal Fees	\$2,189,572	\$1,577,839	(\$611,733)	-28%
3	Consulting Fees	\$4,202,905	\$6,761,255	\$2,558,350	61%
4	Dues and Membership	\$1,521,952	\$1,461,420	(\$60,532)	-4%
5	Equipment Leases	\$1,628,860	\$1,489,657	(\$139,203)	-9%
6	Building Leases	\$6,789,010	\$5,872,584	(\$916,426)	-13%
7	Repairs and Maintenance	\$12,871,565	\$13,409,320	\$537,755	4%
8	Insurance	\$821,408	\$778,250	(\$43,158)	-5%

STAMFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
9	Travel	\$829,384	\$761,458	(\$67,926)	-8%
10	Conferences	\$0	\$0	\$0	0%
11	Property Tax	\$0	\$0	\$0	0%
12	General Supplies	\$7,786,667	\$3,962,078	(\$3,824,589)	-49%
13	Licenses and Subscriptions	\$122,185	\$138,955	\$16,770	14%
14	Postage and Shipping	\$384,014	\$211,416	(\$172,598)	-45%
15	Advertising	\$2,202,165	\$1,978,743	(\$223,422)	-10%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$0	\$13,222	\$13,222	0%
18	Computer hardware & small equipment	\$0	\$0	\$0	0%
19	Dietary / Food Services	\$0	\$3,081,875	\$3,081,875	0%
20	Lab Fees / Red Cross charges	\$0	\$0	\$0	0%
21	Billing & Collection / Bank Fees	\$0	\$5,876,941	\$5,876,941	0%
22	Recruiting / Employee Education & Recognition	\$0	\$1,929,544	\$1,929,544	0%
23	Laundry / Linen	\$0	\$1,310,858	\$1,310,858	0%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$276,111	\$276,111	0%
26	Purchased Services - Medical	\$0	\$0	\$0	0%
27	Purchased Services - Non Medical	\$0	\$3,005,401	\$3,005,401	0%
28	Other Business Expenses	\$12,039,876	\$6,520,809	(\$5,519,067)	-46%
	Total Business Expenses	\$53,777,288	\$60,786,669	\$7,009,381	13%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$885,468	\$925,736	\$40,268	5%
	Total Operating Expenses - All Expense Categories*	\$461,480,665	\$482,124,601	\$20,643,936	4%
	*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
II.	<u>OPERATING EXPENSE BY DEPARTMENT</u>				
A.	<u>General Services:</u>				
1	General Administration	\$106,841,321	\$108,693,556	\$1,852,235	2%
2	General Accounting	\$3,814,288	\$3,742,114	(\$72,174)	-2%
3	Patient Billing & Collection	\$9,320,598	\$9,435,983	\$115,385	1%
4	Admitting / Registration Office	\$3,283,671	\$3,513,924	\$230,253	7%
5	Data Processing	\$14,633,459	\$16,521,269	\$1,887,810	13%
6	Communications	\$286	\$512	\$226	79%
7	Personnel	\$5,646,595	\$5,059,989	(\$586,606)	-10%
8	Public Relations	\$1,177,184	\$1,096,889	(\$80,295)	-7%
9	Purchasing	\$3,357,444	\$3,744,786	\$387,342	12%
10	Dietary and Cafeteria	\$5,854,000	\$7,100,836	\$1,246,836	21%
11	Housekeeping	\$5,161,785	\$5,715,386	\$553,601	11%
12	Laundry & Linen	\$1,732,745	\$1,866,109	\$133,364	8%
13	Operation of Plant	\$900,537	\$721,477	(\$179,060)	-20%
14	Security	\$1,770,944	\$1,589,909	(\$181,035)	-10%
15	Repairs and Maintenance	\$12,612,866	\$14,017,958	\$1,405,092	11%
16	Central Sterile Supply	\$1,639,701	\$2,008,824	\$369,123	23%
17	Pharmacy Department	\$11,911,692	\$11,585,799	(\$325,893)	-3%
18	Other General Services	\$9,556,414	\$9,556,017	(\$397)	0%
	Total General Services	\$199,215,530	\$205,971,337	\$6,755,807	3%
B.	<u>Professional Services:</u>				
1	Medical Care Administration	\$3,680,006	\$3,571,822	(\$108,184)	-3%
2	Residency Program	\$5,863,147	\$6,145,500	\$282,353	5%
3	Nursing Services Administration	\$5,053,709	\$3,323,244	(\$1,730,465)	-34%
4	Medical Records	\$2,830,154	\$3,193,341	\$363,187	13%

STAMFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
5	Social Service	\$837,280	\$834,549	(\$2,731)	0%
6	Other Professional Services	\$2,675,539	\$2,821,275	\$145,736	5%
	Total Professional Services	\$20,939,835	\$19,889,731	(\$1,050,104)	-5%
C.	<u>Special Services:</u>				
1	Operating Room	\$45,689,289	\$44,952,839	(\$736,450)	-2%
2	Recovery Room	\$3,906,829	\$3,958,895	\$52,066	1%
3	Anesthesiology	\$563,485	\$550,743	(\$12,742)	-2%
4	Delivery Room	\$6,416,532	\$6,636,756	\$220,224	3%
5	Diagnostic Radiology	\$10,034,272	\$9,674,502	(\$359,770)	-4%
6	Diagnostic Ultrasound	\$2,356,419	\$2,519,992	\$163,573	7%
7	Radiation Therapy	\$4,448,025	\$4,030,883	(\$417,142)	-9%
8	Radioisotopes	\$1,129,458	\$1,178,595	\$49,137	4%
9	CT Scan	\$1,758,489	\$1,747,031	(\$11,458)	-1%
10	Laboratory	\$19,139,955	\$20,400,680	\$1,260,725	7%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$7,776,548	\$7,790,859	\$14,311	0%
13	Electrocardiology	\$4,865,711	\$6,759,408	\$1,893,697	39%
14	Electroencephalography	\$299,732	\$300,163	\$431	0%
15	Occupational Therapy	\$220,572	\$256,324	\$35,752	16%
16	Speech Pathology	\$50,415	\$64,631	\$14,216	28%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$3,570,246	\$3,716,797	\$146,551	4%
19	Pulmonary Function	\$755,965	\$813,417	\$57,452	8%
20	Intravenous Therapy	\$939,602	\$907,429	(\$32,173)	-3%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$409,516	\$422,643	\$13,127	3%
24	Emergency Room	\$8,325,721	\$9,324,432	\$998,711	12%
25	MRI	\$1,758,041	\$2,052,469	\$294,428	17%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$509,670	\$478,450	(\$31,220)	-6%
28	Endoscopy	\$0	\$0	\$0	0%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$4,425,535	\$4,453,056	\$27,521	1%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$0	\$222	\$222	0%
	Total Special Services	\$129,350,027	\$132,991,216	\$3,641,189	3%
D.	<u>Routine Services:</u>				
1	Medical & Surgical Units	\$51,801,566	\$63,555,996	\$11,754,430	23%
2	Intensive Care Unit	\$8,300,422	\$8,901,117	\$600,695	7%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$3,953,671	\$4,011,262	\$57,591	1%
5	Pediatric Unit	\$4,874,476	\$4,754,434	(\$120,042)	-2%
6	Maternity Unit	\$6,000,751	\$5,587,699	(\$413,052)	-7%
7	Newborn Nursery Unit	\$2,171,336	\$1,982,011	(\$189,325)	-9%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$2,195,744	\$2,265,354	\$69,610	3%
10	Ambulatory Surgery	\$3,701,863	\$3,825,164	\$123,301	3%
11	Home Care	\$0	\$0	\$0	0%

STAMFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$436,167,190	\$ 475,258,979	\$504,856,844
2	Other Operating Revenue	21,067,324	22,722,727	24,382,136
3	Total Operating Revenue	\$457,234,514	\$497,981,706	\$529,238,980
4	Total Operating Expenses	431,680,034	461,480,665	482,124,601
5	Income/(Loss) From Operations	\$25,554,480	\$36,501,041	\$47,114,379
6	Total Non-Operating Revenue	(167,187)	221,386	(10,097,527)
7	Excess/(Deficiency) of Revenue Over Expenses	\$25,387,293	\$36,722,427	\$37,016,852
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	5.59%	7.33%	9.08%
2	Hospital Non Operating Margin	-0.04%	0.04%	-1.95%
3	Hospital Total Margin	5.55%	7.37%	7.13%
4	Income/(Loss) From Operations	\$25,554,480	\$36,501,041	\$47,114,379
5	Total Operating Revenue	\$457,234,514	\$497,981,706	\$529,238,980
6	Total Non-Operating Revenue	(\$167,187)	\$221,386	(\$10,097,527)
7	Total Revenue	\$457,067,327	\$498,203,092	\$519,141,453
8	Excess/(Deficiency) of Revenue Over Expenses	\$25,387,293	\$36,722,427	\$37,016,852
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$82,055,000	\$108,504,000	\$120,895,000
2	Hospital Total Net Assets	\$109,583,000	\$135,199,000	\$161,014,000
3	Hospital Change in Total Net Assets	\$38,770,000	\$25,616,000	\$25,815,000
4	Hospital Change in Total Net Assets %	154.7%	23.4%	19.1%
D. <u>Cost Data Summary</u>				
1	<u>Ratio of Cost to Charges</u>	0.33	0.31	0.29
2	Total Operating Expenses	\$431,680,034	\$461,480,665	\$482,124,601
3	Total Gross Revenue	\$1,288,625,721	\$1,459,332,524	\$1,642,590,508
4	Total Other Operating Revenue	\$24,062,351	\$24,588,226	\$23,115,000
5	<u>Private Payment to Cost Ratio</u>	1.37	1.43	1.49
6	Total Non-Government Payments	\$268,889,831	\$297,292,692	\$313,955,958

STAMFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
7	Total Uninsured Payments	\$2,164,844	\$2,038,295	\$2,010,566
8	Total Non-Government Charges	\$655,558,531	\$738,397,382	\$809,729,102
9	Total Uninsured Charges	\$63,573,241	\$73,238,195	\$88,059,017
10	<u>Medicare Payment to Cost Ratio</u>	0.65	0.61	0.64
11	Total Medicare Payments	\$102,485,288	\$101,191,530	\$112,070,218
12	Total Medicare Charges	\$478,347,624	\$532,795,068	\$608,680,750
13	<u>Medicaid Payment to Cost Ratio</u>	0.54	0.50	0.58
14	Total Medicaid Payments	\$21,500,232	\$28,079,037	\$36,819,909
15	Total Medicaid Charges	\$122,028,972	\$182,108,561	\$217,748,363
16	<u>Uncompensated Care Cost</u>	\$21,671,931	\$23,111,558	\$25,108,167
17	Charity Care	\$23,197,082	\$27,344,589	\$34,807,823
18	Bad Debts	\$42,704,703	\$46,972,113	\$51,939,073
19	Total Uncompensated Care	\$65,901,785	\$74,316,702	\$86,746,896
20	<u>Uncompensated Care % of Total Expenses</u>	5.0%	5.0%	5.2%
21	Total Operating Expenses	\$431,680,034	\$461,480,665	\$482,124,601
E.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	1.72	1.91	1.80
2	Total Current Assets	\$115,583,000	\$157,909,000	\$184,709,000
3	Total Current Liabilities	\$67,314,000	\$82,484,000	\$102,725,000
4	<u>Days Cash on Hand</u>	45	68	79
5	Cash and Cash Equivalents	\$49,254,000	\$80,693,000	\$68,128,000
6	Short Term Investments	188,000	276,000	30,119,000
7	Total Cash and Short Term Investments	\$49,442,000	\$80,969,000	\$98,247,000
8	Total Operating Expenses	\$431,680,034	\$461,480,665	\$482,124,601
9	Depreciation Expense	\$27,391,465	\$27,314,964	\$26,236,169
10	Operating Expenses less Depreciation Expense	\$404,288,569	\$434,165,701	\$455,888,432
11	<u>Days Revenue in Patient Accounts Receivable</u>	43.36	43.77	43.19

STAMFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
12	Net Patient Accounts Receivable	\$ 50,691,000	\$ 59,828,000	\$ 64,792,000
13	Due From Third Party Payers	\$3,941,000	\$2,592,000	\$2,554,000
14	Due To Third Party Payers	\$2,813,000	\$5,424,000	\$7,600,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 51,819,000	\$ 56,996,000	\$ 59,746,000
16	Total Net Patient Revenue	\$436,167,190	\$ 475,258,979	\$ 504,856,844
17	Average Payment Period	60.77	69.34	82.25
18	Total Current Liabilities	\$67,314,000	\$82,484,000	\$102,725,000
19	Total Operating Expenses	\$431,680,034	\$461,480,665	\$482,124,601
20	Depreciation Expense	\$27,391,465	\$27,314,964	\$26,236,169
21	Total Operating Expenses less Depreciation Expense	\$404,288,569	\$434,165,701	\$455,888,432
F. Solvency Measures Summary				
1	Equity Financing Ratio	25.5	28.3	20.2
2	Total Net Assets	\$109,583,000	\$135,199,000	\$161,014,000
3	Total Assets	\$428,973,000	\$478,461,000	\$798,095,000
4	Cash Flow to Total Debt Ratio	26.7	30.1	13.1
5	Excess/(Deficiency) of Revenues Over Expenses	\$25,387,293	\$36,722,427	\$37,016,852
6	Depreciation Expense	\$27,391,465	\$27,314,964	\$26,236,169
7	Excess of Revenues Over Expenses and Depreciation Expense	\$52,778,758	\$64,037,391	\$63,253,021
8	Total Current Liabilities	\$67,314,000	\$82,484,000	\$102,725,000
9	Total Long Term Debt	\$130,114,000	\$130,025,000	\$379,180,000
10	Total Current Liabilities and Total Long Term Debt	\$197,428,000	\$212,509,000	\$481,905,000
11	Long Term Debt to Capitalization Ratio	54.3	49.0	70.2
12	Total Long Term Debt	\$130,114,000	\$130,025,000	\$379,180,000
13	Total Net Assets	\$109,583,000	\$135,199,000	\$161,014,000
14	Total Long Term Debt and Total Net Assets	\$239,697,000	\$265,224,000	\$540,194,000
15	Debt Service Coverage Ratio	0.5	6.9	6.5
16	Excess Revenues over Expenses	\$25,387,293	\$36,722,427	\$37,016,852
17	Interest Expense	\$4,876,423	\$5,545,081	\$5,640,878
18	Depreciation and Amortization Expense	\$27,391,465	\$27,314,964	\$26,236,169

STAMFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
19	Principal Payments	\$117,047,000	\$4,576,000	\$4,939,000
G. Other Financial Ratios				
20	Average Age of Plant	10.4	11.5	12.9
21	Accumulated Depreciation	\$285,332,000	\$313,648,000	\$339,669,000
22	Depreciation and Amortization Expense	\$27,391,465	\$27,314,964	\$26,236,169
H. Utilization Measures Summary				
1	Patient Days	76,225	74,442	70,911
2	Discharges	15,089	14,940	14,294
3	ALOS	5.1	5.0	5.0
4	Staffed Beds	269	271	267
5	Available Beds	-	322	325
6	Licensed Beds	330	330	330
6	Occupancy of Staffed Beds	77.6%	75.3%	72.8%
7	Occupancy of Available Beds	64.9%	63.3%	59.8%
8	Full Time Equivalent Employees	2,051.8	2,089.4	2,034.6
I. Hospital Gross Revenue Payer Mix Percentage				
1	Non-Government Gross Revenue Payer Mix Percentage	45.9%	45.6%	43.9%
2	Medicare Gross Revenue Payer Mix Percentage	37.1%	36.5%	37.1%
3	Medicaid Gross Revenue Payer Mix Percentage	9.5%	12.5%	13.3%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	2.5%	0.3%	0.3%
5	Uninsured Gross Revenue Payer Mix Percentage	4.9%	5.0%	5.4%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$591,985,290	\$665,159,187	\$721,670,085
9	Medicare Gross Revenue (Charges)	\$478,347,624	\$532,795,068	\$608,680,750
10	Medicaid Gross Revenue (Charges)	\$122,028,972	\$182,108,561	\$217,748,363
11	Other Medical Assistance Gross Revenue (Charges)	\$32,014,244	\$4,374,423	\$4,715,341
12	Uninsured Gross Revenue (Charges)	\$63,573,241	\$73,238,195	\$88,059,017
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$676,350	\$1,657,090	\$1,716,952
14	Total Gross Revenue (Charges)	\$1,288,625,721	\$1,459,332,524	\$1,642,590,508
J. Hospital Net Revenue Payer Mix Percentage				
1	Non-Government Net Revenue Payer Mix Percentage	67.5%	69.1%	67.3%

STAMFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
2	Medicare Net Revenue Payer Mix Percentage	25.9%	23.7%	24.2%
3	Medicaid Net Revenue Payer Mix Percentage	5.4%	6.6%	7.9%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.5%	0.1%	0.1%
5	Uninsured Net Revenue Payer Mix Percentage	0.5%	0.5%	0.4%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.0%	0.1%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$266,724,987	\$295,254,397	\$311,945,392
9	Medicare Net Revenue (Payments)	\$102,485,288	\$101,191,530	\$112,070,218
10	Medicaid Net Revenue (Payments)	\$21,500,232	\$28,079,037	\$36,819,909
11	Other Medical Assistance Net Revenue (Payments)	\$2,001,415	\$338,102	\$584,208
12	Uninsured Net Revenue (Payments)	\$2,164,844	\$2,038,295	\$2,010,566
13	CHAMPUS / TRICARE Net Revenue Payments)	\$110,138	\$372,460	\$358,764
14	Total Net Revenue (Payments)	\$394,986,904	\$427,273,821	\$463,789,057
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	6,787	6,526	5,963
2	Medicare	5,382	5,251	5,144
3	Medical Assistance	2,907	3,147	3,173
4	Medicaid	2,457	3,039	3,089
5	Other Medical Assistance	450	108	84
6	CHAMPUS / TRICARE	13	16	14
7	Uninsured (Included In Non-Government)	490	479	399
8	Total	15,089	14,940	14,294
L.	Case Mix Index			
1	Non-Government (Including Self Pay / Uninsured)	1.060060	1.117600	1.124230
2	Medicare	1.535090	1.515170	1.623650
3	Medical Assistance	0.971618	0.969055	1.038579
4	Medicaid	0.921550	0.973500	1.041470
5	Other Medical Assistance	1.244990	0.843980	0.932270
6	CHAMPUS / TRICARE	0.750340	1.314500	0.776520
7	Uninsured (Included In Non-Government)	1.103770	1.122670	1.159850
8	Total Case Mix Index	1.212189	1.226255	1.284603
M.	Emergency Department Visits			
1	Emergency Room - Treated and Admitted	8,068	8,175	7,642
2	Emergency Room - Treated and Discharged	39,642	40,316	43,189
3	Total Emergency Room Visits	47,710	48,491	50,831

**STAMFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE CONNECTICUT					
1	Inpatient Charges	\$1,334,301	\$1,748,609	\$414,308	31%
2	Inpatient Payments	\$317,371	\$405,921	\$88,550	28%
3	Outpatient Charges	\$1,448,828	\$3,376,336	\$1,927,508	133%
4	Outpatient Payments	\$229,055	\$573,948	\$344,893	151%
5	Discharges	25	30	5	20%
6	Patient Days	107	166	59	55%
7	Outpatient Visits (Excludes ED Visits)	372	927	555	149%
8	Emergency Department Outpatient Visits	35	82	47	134%
9	Emergency Department Inpatient Admissions	33	25	(8)	-24%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,783,129	\$5,124,945	\$2,341,816	84%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$546,426	\$979,869	\$433,443	79%
B. CIGNA HEALTHCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$26,525	\$463	(\$26,062)	-98%
4	Outpatient Payments	\$665	\$30	(\$635)	-95%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	2	1	(1)	-50%
8	Emergency Department Outpatient Visits	1	0	(1)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$26,525	\$463	(\$26,062)	-98%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$665	\$30	(\$635)	-95%
C. CONNECTICARE, INC.					
1	Inpatient Charges	\$2,701,295	\$2,827,123	\$125,828	5%
2	Inpatient Payments	\$518,779	\$594,261	\$75,482	15%
3	Outpatient Charges	\$3,581,312	\$4,952,622	\$1,371,310	38%
4	Outpatient Payments	\$442,873	\$634,970	\$192,097	43%
5	Discharges	31	44	13	42%
6	Patient Days	263	286	23	9%
7	Outpatient Visits (Excludes ED Visits)	900	1,233	333	37%
8	Emergency Department Outpatient Visits	56	84	28	50%
9	Emergency Department Inpatient Admissions	27	34	7	26%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$6,282,607	\$7,779,745	\$1,497,138	24%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$961,652	\$1,229,231	\$267,579	28%

**STAMFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$8,035,366	\$0	(\$8,035,366)	-100%
2	Inpatient Payments	\$1,585,967	\$0	(\$1,585,967)	-100%
3	Outpatient Charges	\$5,628,168	\$0	(\$5,628,168)	-100%
4	Outpatient Payments	\$729,646	\$0	(\$729,646)	-100%
5	Discharges	136	0	(136)	-100%
6	Patient Days	952	0	(952)	-100%
7	Outpatient Visits (Excludes ED Visits)	1,774	0	(1,774)	-100%
8	Emergency Department Outpatient Visits	123	0	(123)	-100%
9	Emergency Department Inpatient Admissions	108	0	(108)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$13,663,534	\$0	(\$13,663,534)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,315,613	\$0	(\$2,315,613)	-100%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$519,198	\$1,595,439	\$1,076,241	207%
2	Inpatient Payments	\$102,880	\$214,933	\$112,053	109%
3	Outpatient Charges	\$488,396	\$1,450,946	\$962,550	197%
4	Outpatient Payments	\$81,450	\$117,246	\$35,796	44%
5	Discharges	15	20	5	33%
6	Patient Days	67	131	64	96%
7	Outpatient Visits (Excludes ED Visits)	62	105	43	69%
8	Emergency Department Outpatient Visits	20	40	20	100%
9	Emergency Department Inpatient Admissions	15	16	1	7%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,007,594	\$3,046,385	\$2,038,791	202%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$184,330	\$332,179	\$147,849	80%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$277,769	\$0	(\$277,769)	-100%
2	Inpatient Payments	\$51,379	\$0	(\$51,379)	-100%
3	Outpatient Charges	\$204,269	\$95,631	(\$108,638)	-53%
4	Outpatient Payments	\$34,844	\$15,093	(\$19,751)	-57%
5	Discharges	5	0	(5)	-100%
6	Patient Days	26	0	(26)	-100%
7	Outpatient Visits (Excludes ED Visits)	51	16	(35)	-69%
8	Emergency Department Outpatient Visits	4	2	(2)	-50%
9	Emergency Department Inpatient Admissions	4	0	(4)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$482,038	\$95,631	(\$386,407)	-80%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$86,223	\$15,093	(\$71,130)	-82%

STAMFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$23,324,959	\$31,483,881	\$8,158,922	35%
2	Inpatient Payments	\$4,489,970	\$6,886,179	\$2,396,209	53%
3	Outpatient Charges	\$24,311,949	\$38,048,923	\$13,736,974	57%
4	Outpatient Payments	\$3,603,252	\$5,669,316	\$2,066,064	57%
5	Discharges	423	587	164	39%
6	Patient Days	2,521	3,288	767	30%
7	Outpatient Visits (Excludes ED Visits)	7,589	10,102	2,513	33%
8	Emergency Department Outpatient Visits	508	828	320	63%
9	Emergency Department Inpatient Admissions	337	465	128	38%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$47,636,908	\$69,532,804	\$21,895,896	46%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$8,093,222	\$12,555,495	\$4,462,273	55%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$556,148	\$1,328,440	\$772,292	139%
2	Inpatient Payments	\$114,835	\$301,890	\$187,055	163%
3	Outpatient Charges	\$426,343	\$877,869	\$451,526	106%
4	Outpatient Payments	\$49,062	\$117,029	\$67,967	139%
5	Discharges	16	21	5	31%
6	Patient Days	95	178	83	87%
7	Outpatient Visits (Excludes ED Visits)	125	271	146	117%
8	Emergency Department Outpatient Visits	32	46	14	44%
9	Emergency Department Inpatient Admissions	15	16	1	7%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$982,491	\$2,206,309	\$1,223,818	125%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$163,897	\$418,919	\$255,022	156%
I. AETNA					
1	Inpatient Charges	\$2,556,718	\$2,323,392	(\$233,326)	-9%
2	Inpatient Payments	\$554,064	\$492,870	(\$61,194)	-11%
3	Outpatient Charges	\$2,289,974	\$3,329,580	\$1,039,606	45%
4	Outpatient Payments	\$415,926	\$609,397	\$193,471	47%
5	Discharges	44	43	(1)	-2%
6	Patient Days	300	242	(58)	-19%
7	Outpatient Visits (Excludes ED Visits)	638	1,089	451	71%
8	Emergency Department Outpatient Visits	39	62	23	59%
9	Emergency Department Inpatient Admissions	33	28	(5)	-15%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,846,692	\$5,652,972	\$806,280	17%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$969,990	\$1,102,267	\$132,277	14%

**STAMFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
J. HUMANA					
1	Inpatient Charges	\$414,317	\$191,340	(\$222,977)	-54%
2	Inpatient Payments	\$75,445	\$40,750	(\$34,695)	-46%
3	Outpatient Charges	\$295,030	\$95,715	(\$199,315)	-68%
4	Outpatient Payments	\$53,806	\$17,972	(\$35,834)	-67%
5	Discharges	7	8	1	14%
6	Patient Days	28	32	4	14%
7	Outpatient Visits (Excludes ED Visits)	71	22	(49)	-69%
8	Emergency Department Outpatient Visits	11	9	(2)	-18%
9	Emergency Department Inpatient Admissions	3	8	5	167%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$709,347	\$287,055	(\$422,292)	-60%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$129,251	\$58,722	(\$70,529)	-55%
K. SECURE HORIZONS					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L. UNICARE LIFE & HEALTH INSURANCE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

STAMFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
M. UNIVERSAL AMERICAN					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N. EVERCARE					
1	Inpatient Charges	\$1,253,450	\$152,780	(\$1,100,670)	-88%
2	Inpatient Payments	\$281,764	\$36,501	(\$245,263)	-87%
3	Outpatient Charges	\$263,267	\$124,330	(\$138,937)	-53%
4	Outpatient Payments	\$34,537	\$17,698	(\$16,839)	-49%
5	Discharges	7	4	(3)	-43%
6	Patient Days	296	33	(263)	-89%
7	Outpatient Visits (Excludes ED Visits)	110	52	(58)	-53%
8	Emergency Department Outpatient Visits	17	5	(12)	-71%
9	Emergency Department Inpatient Admissions	6	4	(2)	-33%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,516,717	\$277,110	(\$1,239,607)	-82%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$316,301	\$54,199	(\$262,102)	-83%
II. TOTAL MEDICARE MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$40,973,521	\$41,651,004	\$677,483	2%
	TOTAL INPATIENT PAYMENTS	\$8,092,454	\$8,973,305	\$880,851	11%
	TOTAL OUTPATIENT CHARGES	\$38,964,061	\$52,352,415	\$13,388,354	34%
	TOTAL OUTPATIENT PAYMENTS	\$5,675,116	\$7,772,699	\$2,097,583	37%
	TOTAL DISCHARGES	709	757	48	7%
	TOTAL PATIENT DAYS	4,655	4,356	(299)	-6%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	11,694	13,818	2,124	18%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	846	1,158	312	37%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	581	596	15	3%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$79,937,582	\$94,003,419	\$14,065,837	18%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$13,767,570	\$16,746,004	\$2,978,434	22%

STAMFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$17,921	\$0	(\$17,921)	-100%
4	Outpatient Payments	\$2,611	\$0	(\$2,611)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	4	0	(4)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$17,921	\$0	(\$17,921)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,611	\$0	(\$2,611)	-100%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$15,873,383	\$4,053,637	(\$11,819,746)	-74%
2	Inpatient Payments	\$2,654,256	\$570,549	(\$2,083,707)	-79%
3	Outpatient Charges	\$32,378,581	\$8,728,736	(\$23,649,845)	-73%
4	Outpatient Payments	\$5,421,894	\$1,154,519	(\$4,267,375)	-79%
5	Discharges	749	117	(632)	-84%
6	Patient Days	2,632	553	(2,079)	-79%
7	Outpatient Visits (Excludes ED Visits)	13,395	3,333	(10,062)	-75%
8	Emergency Department Outpatient Visits	5,621	1,492	(4,129)	-73%
9	Emergency Department Inpatient Admissions	200	47	(153)	-77%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$48,251,964	\$12,782,373	(\$35,469,591)	-74%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$8,076,150	\$1,725,068	(\$6,351,082)	-79%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

STAMFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
D.	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$0	\$88,874	\$88,874	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$43,123	\$201,611	\$158,488	368%
4	Outpatient Payments	\$8,591	\$0	(\$8,591)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	24	0	(24)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$43,123	\$290,485	\$247,362	574%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$8,591	\$0	(\$8,591)	-100%
E.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F.	FIRST CHOICE OF CONNECTICUT, PREFERRED ONE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$10,340	\$9,491	(\$849)	-8%
4	Outpatient Payments	\$2,360	\$7,595	\$5,235	222%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	2	0	(2)	-100%
8	Emergency Department Outpatient Visits	1	2	1	100%

STAMFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$10,340	\$9,491	(\$849)	-8%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,360	\$7,595	\$5,235	222%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$4,509,431	\$949,008	(\$3,560,423)	-79%
2	Inpatient Payments	\$860,630	\$154,350	(\$706,280)	-82%
3	Outpatient Charges	\$8,447,310	\$2,175,397	(\$6,271,913)	-74%
4	Outpatient Payments	\$1,535,565	\$372,851	(\$1,162,714)	-76%
5	Discharges	214	37	(177)	-83%
6	Patient Days	734	136	(598)	-81%
7	Outpatient Visits (Excludes ED Visits)	3,231	900	(2,331)	-72%
8	Emergency Department Outpatient Visits	1,332	297	(1,035)	-78%
9	Emergency Department Inpatient Admissions	57	17	(40)	-70%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$12,956,741	\$3,124,405	(\$9,832,336)	-76%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,396,195	\$527,201	(\$1,868,994)	-78%
H.	AETNA				
1	Inpatient Charges	\$4,514,597	\$909,150	(\$3,605,447)	-80%
2	Inpatient Payments	\$841,264	\$166,273	(\$674,991)	-80%
3	Outpatient Charges	\$8,026,469	\$2,497,341	(\$5,529,128)	-69%
4	Outpatient Payments	\$1,494,918	\$437,722	(\$1,057,196)	-71%
5	Discharges	209	37	(172)	-82%
6	Patient Days	740	104	(636)	-86%
7	Outpatient Visits (Excludes ED Visits)	3,337	888	(2,449)	-73%
8	Emergency Department Outpatient Visits	1,134	326	(808)	-71%
9	Emergency Department Inpatient Admissions	54	10	(44)	-81%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$12,541,066	\$3,406,491	(\$9,134,575)	-73%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,336,182	\$603,995	(\$1,732,187)	-74%
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$24,897,411	\$6,000,669	(\$18,896,742)	-76%
	TOTAL INPATIENT PAYMENTS	\$4,356,150	\$891,172	(\$3,464,978)	-80%
	TOTAL OUTPATIENT CHARGES	\$48,923,744	\$13,612,576	(\$35,311,168)	-72%
	TOTAL OUTPATIENT PAYMENTS	\$8,465,939	\$1,972,687	(\$6,493,252)	-77%
	TOTAL DISCHARGES	1,172	191	(981)	-84%
	TOTAL PATIENT DAYS	4,106	793	(3,313)	-81%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	19,993	5,121	(14,872)	-74%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	8,088	2,117	(5,971)	-74%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	311	74	(237)	-76%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$73,821,155	\$19,613,245	(\$54,207,910)	-73%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$12,822,089	\$2,863,859	(\$9,958,230)	-78%

**STAMFORD HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE

STAMFORD HEALTH SYSTEM					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$94,498,000	\$76,275,000	(\$18,223,000)	-19%
2	Short Term Investments	\$25,033,000	\$119,215,000	\$94,182,000	376%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$62,433,000	\$69,756,000	\$7,323,000	12%
4	Current Assets Whose Use is Limited for Current Liabilities	\$748,000	\$640,000	(\$108,000)	-14%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$2,592,000	\$2,554,000	(\$38,000)	-1%
7	Inventories of Supplies	\$4,793,000	\$5,408,000	\$615,000	13%
8	Prepaid Expenses	\$4,424,000	\$5,335,000	\$911,000	21%
9	Other Current Assets	\$8,202,000	\$17,142,000	\$8,940,000	109%
	Total Current Assets	\$202,723,000	\$296,325,000	\$93,602,000	46%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$1,699,000	\$243,826,000	\$242,127,000	14251%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$43,117,000	\$37,839,000	(\$5,278,000)	-12%
	Total Noncurrent Assets Whose Use is Limited:	\$44,816,000	\$281,665,000	\$236,849,000	528%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$106,144,000	\$117,299,000	\$11,155,000	11%
7	Other Noncurrent Assets	\$70,741,000	\$25,521,000	(\$45,220,000)	-64%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$559,662,000	\$572,699,000	\$13,037,000	2%
2	Less: Accumulated Depreciation	\$329,376,000	\$355,813,000	\$26,437,000	\$0
	Property, Plant and Equipment, Net	\$230,286,000	\$216,886,000	(\$13,400,000)	-6%
3	Construction in Progress	\$23,297,000	\$49,634,000	\$26,337,000	113%
	Total Net Fixed Assets	\$253,583,000	\$266,520,000	\$12,937,000	5%
	Total Assets	\$678,007,000	\$987,330,000	\$309,323,000	46%

STAMFORD HEALTH SYSTEM					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
II. <u>LIABILITIES AND NET ASSETS</u>					
A. <u>Current Liabilities:</u>					
1	Accounts Payable and Accrued Expenses	\$51,497,000	\$68,893,000	\$17,396,000	34%
2	Salaries, Wages and Payroll Taxes	\$10,176,000	\$12,161,000	\$1,985,000	20%
3	Due To Third Party Payers	\$10,254,000	\$27,424,000	\$17,170,000	167%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$6,018,000	\$5,656,000	(\$362,000)	-6%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$19,975,000	\$18,570,000	(\$1,405,000)	-7%
	Total Current Liabilities	\$97,920,000	\$132,704,000	\$34,784,000	36%
B. <u>Long Term Debt:</u>					
1	Bonds Payable (Net of Current Portion)	\$151,881,000	\$384,520,000	\$232,639,000	153%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$151,881,000	\$384,520,000	\$232,639,000	153%
3	Accrued Pension Liability	\$102,463,000	\$120,448,000	\$17,985,000	18%
4	Other Long Term Liabilities	\$127,629,000	\$40,726,000	(\$86,903,000)	-68%
	Total Long Term Liabilities	\$381,973,000	\$545,694,000	\$163,721,000	43%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
C. <u>Net Assets:</u>					
1	Unrestricted Net Assets or Equity	\$169,011,000	\$266,405,000	\$97,394,000	58%
2	Temporarily Restricted Net Assets	\$21,023,000	\$34,447,000	\$13,424,000	64%
3	Permanently Restricted Net Assets	\$8,080,000	\$8,080,000	\$0	0%
	Total Net Assets	\$198,114,000	\$308,932,000	\$110,818,000	56%
	Total Liabilities and Net Assets	\$678,007,000	\$987,330,000	\$309,323,000	46%

STAMFORD HEALTH SYSTEM					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,459,332,537	\$1,642,590,508	\$183,257,971	13%
2	Less: Allowances	\$967,141,721	\$1,088,497,623	\$121,355,902	13%
3	Less: Charity Care	\$27,344,589	\$34,807,821	\$7,463,232	27%
4	Less: Other Deductions	(\$10,412,752)	(\$9,458,936)	\$953,816	-9%
	Total Net Patient Revenue	\$475,258,979	\$528,744,000	\$53,485,021	11%
5	Other Operating Revenue	\$36,379,771	\$25,773,080	(\$10,606,691)	-29%
6	Net Assets Released from Restrictions	\$2,397,063	\$1,268,414	(\$1,128,649)	-47%
	Total Operating Revenue	\$514,035,813	\$555,785,494	\$41,749,681	8%
B. Operating Expenses:					
1	Salaries and Wages	\$187,106,689	\$204,461,653	\$17,354,964	9%
2	Fringe Benefits	\$51,862,161	\$54,093,664	\$2,231,503	4%
3	Physicians Fees	\$12,483,575	\$13,400,084	\$916,509	7%
4	Supplies and Drugs	\$51,436,302	\$60,573,089	\$9,136,787	18%
5	Depreciation and Amortization	\$29,299,797	\$27,388,196	(\$1,911,601)	-7%
6	Bad Debts	\$47,360,053	\$52,587,000	\$5,226,947	11%
7	Interest	\$5,683,048	\$5,821,646	\$138,598	2%
8	Malpractice	\$2,927,387	\$3,153,947	\$226,560	8%
9	Other Operating Expenses	\$97,892,022	\$107,428,515	\$9,536,493	10%
	Total Operating Expenses	\$486,051,034	\$528,907,794	\$42,856,760	9%
	Income/(Loss) From Operations	\$27,984,779	\$26,877,700	(\$1,107,079)	-4%
C. Non-Operating Revenue:					
1	Income from Investments	(\$1,859,644)	\$6,037,464	\$7,897,108	-425%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	(\$405,449)	(\$8,358,569)	(\$7,953,120)	1962%
	Total Non-Operating Revenue	(\$2,265,093)	(\$2,321,105)	(\$56,012)	2%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$25,719,686	\$24,556,595	(\$1,163,091)	-5%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$1,541,084	\$155,513	(\$1,385,571)	-90%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$1,541,084	\$155,513	(\$1,385,571)	-90%
	Excess/(Deficiency) of Revenue Over Expenses	\$27,260,770	\$24,712,108	(\$2,548,662)	-9%

STAMFORD HEALTH SYSTEM				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
A. Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$434,344,495	\$475,258,979	\$528,744,000
2	Other Operating Revenue	59,243,947	38,776,834	27,041,494
3	Total Operating Revenue	\$493,588,442	\$514,035,813	\$555,785,494
4	Total Operating Expenses	470,884,231	486,051,034	528,907,794
5	Income/(Loss) From Operations	\$22,704,211	\$27,984,779	\$26,877,700
6	Total Non-Operating Revenue	4,877,409	(724,009)	(2,165,592)
7	Excess/(Deficiency) of Revenue Over Expenses	\$27,581,620	\$27,260,770	\$24,712,108
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	4.55%	5.45%	4.85%
2	Parent Corporation Non-Operating Margin	0.98%	-0.14%	-0.39%
3	Parent Corporation Total Margin	5.53%	5.31%	4.46%
4	Income/(Loss) From Operations	\$22,704,211	\$27,984,779	\$26,877,700
5	Total Operating Revenue	\$493,588,442	\$514,035,813	\$555,785,494
6	Total Non-Operating Revenue	\$4,877,409	(\$724,009)	(\$2,165,592)
7	Total Revenue	\$498,465,851	\$513,311,804	\$553,619,902
8	Excess/(Deficiency) of Revenue Over Expenses	\$27,581,620	\$27,260,770	\$24,712,108
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$148,882,000	\$169,011,000	\$266,405,000
2	Parent Corporation Total Net Assets	\$178,818,000	\$198,114,000	\$308,932,000
3	Parent Corporation Change in Total Net Assets	\$10,432,000	\$19,296,000	\$110,818,000
4	Parent Corporation Change in Total Net Assets %	106.2%	10.8%	55.9%

STAMFORD HEALTH SYSTEM				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
D.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	1.69	2.07	2.23
2	Total Current Assets	\$154,562,000	\$202,723,000	\$296,325,000
3	Total Current Liabilities	\$91,392,000	\$97,920,000	\$132,704,000
4	<u>Days Cash on Hand</u>	69	96	142
5	Cash and Cash Equivalents	\$58,541,000	\$94,498,000	\$76,275,000
6	Short Term Investments	24,454,000	25,033,000	119,215,000
7	Total Cash and Short Term Investments	\$82,995,000	\$119,531,000	\$195,490,000
8	Total Operating Expenses	\$470,884,231	\$486,051,034	\$528,907,794
9	Depreciation Expense	\$32,505,448	\$29,299,797	\$27,388,196
10	Operating Expenses less Depreciation Expense	\$438,378,783	\$456,751,237	\$501,519,598
11	<u>Days Revenue in Patient Accounts Receivable</u>	39	42	31
12	Net Patient Accounts Receivable	\$ 51,581,000	\$ 62,433,000	\$ 69,756,000
13	Due From Third Party Payers	\$3,941,000	\$2,592,000	\$2,554,000
14	Due To Third Party Payers	\$9,227,000	\$10,254,000	\$27,424,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 46,295,000	\$ 54,771,000	\$ 44,886,000
16	Total Net Patient Revenue	\$434,344,495	\$475,258,979	\$528,744,000
17	<u>Average Payment Period</u>	76	78	97
18	Total Current Liabilities	\$91,392,000	\$97,920,000	\$132,704,000
19	Total Operating Expenses	\$470,884,231	\$486,051,034	\$528,907,794
20	Depreciation Expense	\$32,505,448	\$29,299,797	\$27,388,196
21	Total Operating Expenses less Depreciation Expense	\$438,378,783	\$456,751,237	\$501,519,598

STAMFORD HEALTH SYSTEM				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	28.5	29.2	31.3
2	Total Net Assets	\$178,818,000	\$198,114,000	\$308,932,000
3	Total Assets	\$627,925,000	\$678,007,000	\$987,330,000
4	<u>Cash Flow to Total Debt Ratio</u>	25.2	22.6	10.1
5	Excess/(Deficiency) of Revenues Over Expenses	\$27,581,620	\$27,260,770	\$24,712,108
6	Depreciation Expense	\$32,505,448	\$29,299,797	\$27,388,196
7	Excess of Revenues Over Expenses and Depreciation Expense	\$60,087,068	\$56,560,567	\$52,100,304
8	Total Current Liabilities	\$91,392,000	\$97,920,000	\$132,704,000
9	Total Long Term Debt	\$147,143,000	\$151,881,000	\$384,520,000
10	Total Current Liabilities and Total Long Term Debt	\$238,535,000	\$249,801,000	\$517,224,000
11	<u>Long Term Debt to Capitalization Ratio</u>	45.1	43.4	55.5
12	Total Long Term Debt	\$147,143,000	\$151,881,000	\$384,520,000
13	Total Net Assets	\$178,818,000	\$198,114,000	\$308,932,000
14	Total Long Term Debt and Total Net Assets	\$325,961,000	\$349,995,000	\$693,452,000

STAMFORD HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2012								
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	3(a)	3(b)	(4)	(5)	(6)	(7)
			DISCHARGES				OCCUPANCY	OCCUPANCY
		PATIENT	OR ICU/CCU	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	DAYS	# PATIENT		BEDS (A)	BEDS	BEDS (A)	BEDS
1	Adult Medical/Surgical	43,231	8,377	8,394	182	186	65.1%	63.7%
2	ICU/CCU (Excludes Neonatal ICU)	1,549	141	0	5	16	84.9%	26.5%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	4,555	672	675	14	20	89.1%	62.4%
	TOTAL PSYCHIATRIC	4,555	672	675	14	20	89.1%	62.4%
5	Rehabilitation	4,005	358	358	12	17	91.4%	64.5%
6	Maternity	8,085	2,371	2,337	25	32	88.6%	69.2%
7	Newborn	6,008	1,968	2,015	18	25	91.4%	65.8%
8	Neonatal ICU	2,564	190	0	8	16	87.8%	43.9%
9	Pediatric	914	358	388	3	13	83.5%	19.3%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	64,903	12,326	12,152	249	300	71.4%	59.3%
	TOTAL INPATIENT BED UTILIZATION	70,911	14,294	14,167	267	325	72.8%	59.8%
	TOTAL INPATIENT REPORTED YEAR	70,911	14,294	14,167	267	325	72.8%	59.8%
	TOTAL INPATIENT PRIOR YEAR	74,442	14,940	14,454	271	322	75.3%	63.3%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-3,531	-646	-287	-4	3	-2.5%	-3.6%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-5%	-4%	-2%	-1%	1%	-3%	-6%
	Total Licensed Beds and Bassinets	330						
(A) This number may not exceed the number of available beds for each department or in total.								
Note: Total discharges do not include ICU/CCU patients.								

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
A.	CT Scans (A)				
1	Inpatient Scans	10,517	9,853	-664	-6%
2	Outpatient Scans (Excluding Emergency Department Scans)	24,214	27,901	3,687	15%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	34,731	37,754	3,023	9%
B.	MRI Scans (A)				
1	Inpatient Scans	2,819	2,452	-367	-13%
2	Outpatient Scans (Excluding Emergency Department Scans)	10,951	11,420	469	4%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	13,770	13,872	102	1%
C.	PET Scans (A)				
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
D.	PET/CT Scans (A)				
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	385	404	19	5%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	385	404	19	5%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E.	Linear Accelerator Procedures				
1	Inpatient Procedures	151	166	15	10%
2	Outpatient Procedures	6,160	6,666	506	8%
	Total Linear Accelerator Procedures	6,311	6,832	521	8%
F.	Cardiac Catheterization Procedures				
1	Inpatient Procedures	305	290	-15	-5%
2	Outpatient Procedures	365	370	5	1%
	Total Cardiac Catheterization Procedures	670	660	-10	-1%
G.	Cardiac Angioplasty Procedures				
1	Primary Procedures	60	79	19	32%
2	Elective Procedures	194	226	32	16%
	Total Cardiac Angioplasty Procedures	254	305	51	20%
H.	Electrophysiology Studies				
1	Inpatient Studies	18	20	2	11%
2	Outpatient Studies	33	37	4	12%
	Total Electrophysiology Studies	51	57	6	12%
I.	Surgical Procedures				
1	Inpatient Surgical Procedures	2,918	2,604	-314	-11%
2	Outpatient Surgical Procedures	9,335	9,622	287	3%
	Total Surgical Procedures	12,253	12,226	-27	0%
J.	Endoscopy Procedures				

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
1	Inpatient Endoscopy Procedures	488	428	-60	-12%
2	Outpatient Endoscopy Procedures	6,070	6,011	-59	-1%
	Total Endoscopy Procedures	6,558	6,439	-119	-2%
K.	<u>Hospital Emergency Room Visits</u>				
1	Emergency Room Visits: Treated and Admitted	8,175	7,642	-533	-7%
2	Emergency Room Visits: Treated and Discharged	40,316	43,189	2,873	7%
	Total Emergency Room Visits	48,491	50,831	2,340	5%
L.	<u>Hospital Clinic Visits</u>				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	17,352	17,651	299	2%
	Total Hospital Clinic Visits	17,352	17,651	299	2%
M.	<u>Other Hospital Outpatient Visits</u>				
1	Rehabilitation (PT/OT/ST)	33,033	35,970	2,937	9%
2	Cardiology	6,881	7,053	172	2%
3	Chemotherapy	3,709	6,375	2,666	72%
4	Gastroenterology	0	0	0	0%
5	Other Outpatient Visits	275,807	273,921	-1,886	-1%
	Total Other Hospital Outpatient Visits	319,430	323,319	3,889	1%
N.	<u>Hospital Full Time Equivalent Employees</u>				
1	Total Nursing FTEs	599.4	589.0	-10.4	-2%
2	Total Physician FTEs	117.3	117.4	0.1	0%
3	Total Non-Nursing and Non-Physician FTEs	1,372.7	1,328.2	-44.5	-3%
	Total Hospital Full Time Equivalent Employees	2,089.4	2,034.6	-54.8	-3%

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
A.	<u>Outpatient Surgical Procedures</u>				
1	Stamford Hospital	2,653	2,814	161	6%
2	Tully Health Center	6,682	6,808	126	2%
	Total Outpatient Surgical Procedures(A)	9,335	9,622	287	3%
B.	<u>Outpatient Endoscopy Procedures</u>				
1	Stamford Hospital	113	155	42	37%
2	Tully Health Center	5,957	5,856	-101	-2%
	Total Outpatient Endoscopy Procedures(B)	6,070	6,011	-59	-1%
C.	<u>Outpatient Hospital Emergency Room Visits</u>				
1	Stamford Hospital	40,316	43,189	2,873	7%
	Total Outpatient Hospital Emergency Room Visits(C)	40,316	43,189	2,873	7%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
I.	<u>DATA BY MAJOR PAYER CATEGORY</u>				
A.	<u>MEDICARE</u>				
	<u>MEDICARE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$274,144,530	\$288,590,538	\$14,446,008	5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$65,375,752	\$66,373,090	\$997,338	2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	23.85%	23.00%	-0.85%	-4%
4	DISCHARGES	5,251	5,144	(107)	-2%
5	CASE MIX INDEX (CMI)	1.51517	1.62365	0.10848	7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	7,956.15767	8,352.05560	395.89793	5%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$8,217.00	\$7,946.92	(\$270.08)	-3%
8	PATIENT DAYS	33,327	32,021	(1,306)	-4%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,961.65	\$2,072.80	\$111.15	6%
10	AVERAGE LENGTH OF STAY	6.3	6.2	(0.1)	-2%
	<u>MEDICARE OUTPATIENT</u>				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$258,650,538	\$320,090,212	\$61,439,674	24%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$35,815,778	\$45,697,128	\$9,881,350	28%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	13.85%	14.28%	0.43%	3%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	94.35%	110.92%	16.57%	18%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,954.22606	5,705.46790	751.24184	15%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$7,229.34	\$8,009.36	\$780.02	11%
	<u>MEDICARE TOTALS (INPATIENT + OUTPATIENT)</u>				
17	TOTAL ACCRUED CHARGES	\$532,795,068	\$608,680,750	\$75,885,682	14%
18	TOTAL ACCRUED PAYMENTS	\$101,191,530	\$112,070,218	\$10,878,688	11%
19	TOTAL ALLOWANCES	\$431,603,538	\$496,610,532	\$65,006,994	15%

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
B.	<u>NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</u>				
	<u>NON-GOVERNMENT INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$229,079,508	\$214,192,226	(\$14,887,282)	-6%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$80,776,141	\$68,379,920	(\$12,396,221)	-15%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	35.26%	31.92%	-3.34%	-9%
4	DISCHARGES	6,526	5,963	(563)	-9%
5	CASE MIX INDEX (CMI)	1.11760	1.12423	0.00663	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	7,293.45760	6,703.78349	(589.67411)	-8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,075.15	\$10,200.20	(\$874.95)	-8%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$2,858.15)	(\$2,253.28)	\$604.87	-21%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$20,845,796)	(\$15,105,511)	\$5,740,285	-28%
10	PATIENT DAYS	26,482	24,652	(1,830)	-7%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,050.23	\$2,773.81	(\$276.42)	-9%
12	AVERAGE LENGTH OF STAY	4.1	4.1	0.1	2%
	<u>NON-GOVERNMENT OUTPATIENT</u>				
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$509,317,874	\$595,536,876	\$86,219,002	17%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$216,516,551	\$245,576,038	\$29,059,487	13%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	42.51%	41.24%	-1.28%	-3%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	222.33%	278.04%	55.71%	25%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	14,509.40974	16,579.43642	2,070.02667	14%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$14,922.49	\$14,812.09	(\$110.41)	-1%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	(\$7,693.15)	(\$6,802.73)	\$890.42	-12%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$111,623,114)	(\$112,785,417)	(\$1,162,302)	1%
	<u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u>				
21	TOTAL ACCRUED CHARGES	\$738,397,382	\$809,729,102	\$71,331,720	10%
22	TOTAL ACCRUED PAYMENTS	\$297,292,692	\$313,955,958	\$16,663,266	6%
23	TOTAL ALLOWANCES	\$441,104,690	\$495,773,144	\$54,668,454	12%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$132,468,910)	(\$127,890,928)	\$4,577,982	-3%
	<u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u>				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$635,946,661	\$686,908,665	\$50,962,004	8%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$375,096,311	\$299,755,840	(\$75,340,471)	-20%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$260,850,350	\$387,152,825	\$126,302,475	48%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	41.02%	56.36%	15.34%	

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$19,215,996	\$18,193,219	(\$1,022,777)	-5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$237,449	\$284,223	\$46,774	20%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	1.24%	1.56%	0.33%	26%
4	DISCHARGES	479	399	(80)	-17%
5	CASE MIX INDEX (CMI)	1.12267	1.15985	0.03718	3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	537.75893	462.78015	(74.97878)	-14%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$441.55	\$614.16	\$172.61	39%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$10,633.60	\$9,586.03	(\$1,047.56)	-10%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$7,775.45	\$7,332.75	(\$442.70)	-6%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$4,181,316	\$3,393,452	(\$787,864)	-19%
11	PATIENT DAYS	1,752	1,874	122	7%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$135.53	\$151.67	\$16.14	12%
13	AVERAGE LENGTH OF STAY	3.7	4.7	1.0	28%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$54,022,199	\$69,865,798	\$15,843,599	29%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,800,846	\$1,726,343	(\$74,503)	-4%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	3.33%	2.47%	-0.86%	-26%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	281.13%	384.02%	102.89%	37%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	1,346.61942	1,532.24415	185.62473	14%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,337.31	\$1,126.68	(\$210.63)	-16%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$13,585.18	\$13,685.41	\$100.23	1%
21	MEDICARE - UNINSURED OP PMT / OPED	\$5,892.03	\$6,882.68	\$990.65	17%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,934,322	\$10,545,947	\$2,611,625	33%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$73,238,195	\$88,059,017	\$14,820,822	20%
24	TOTAL ACCRUED PAYMENTS	\$2,038,295	\$2,010,566	(\$27,729)	-1%
25	TOTAL ALLOWANCES	\$71,199,900	\$86,048,451	\$14,848,551	21%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$12,115,638	\$13,939,399	\$1,823,761	15%

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
D.	<u>STATE OF CONNECTICUT MEDICAID</u>				
	<u>MEDICAID INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$89,088,317	\$97,251,144	\$8,162,827	9%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$13,433,933	\$17,349,461	\$3,915,528	29%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	15.08%	17.84%	2.76%	18%
4	DISCHARGES	3,039	3,089	50	2%
5	CASE MIX INDEX (CMI)	0.97350	1.04147	0.06797	7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,958.46650	3,217.10083	258.63433	9%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,540.84	\$5,392.89	\$852.04	19%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$6,534.31	\$4,807.31	(\$1,727.00)	-26%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$3,676.16	\$2,554.03	(\$1,122.13)	-31%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$10,875,788	\$8,216,571	(\$2,659,217)	-24%
11	PATIENT DAYS	13,886	13,770	(116)	-1%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$967.44	\$1,259.95	\$292.50	30%
13	AVERAGE LENGTH OF STAY	4.6	4.5	(0.1)	-2%
	<u>MEDICAID OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$93,020,244	\$120,497,219	\$27,476,975	30%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$14,645,104	\$19,470,448	\$4,825,344	33%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	15.74%	16.16%	0.41%	3%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	104.41%	123.90%	19.49%	19%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,173.12675	3,827.36793	654.24118	21%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,615.35	\$5,087.16	\$471.81	10%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$10,307.14	\$9,724.92	(\$582.22)	-6%
21	MEDICARE - MEDICAID OP PMT / OPED	\$2,613.98	\$2,922.19	\$308.21	12%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$8,294,504	\$11,184,307	\$2,889,803	35%
	<u>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$182,108,561	\$217,748,363	\$35,639,802	20%
24	TOTAL ACCRUED PAYMENTS	\$28,079,037	\$36,819,909	\$8,740,872	31%
25	TOTAL ALLOWANCES	\$154,029,524	\$180,928,454	\$26,898,930	17%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$19,170,292	\$19,400,879	\$230,587	1%

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
E.	<u>OTHER MEDICAL ASSISTANCE (O.M.A.)</u>				
	<u>OTHER MEDICAL ASSISTANCE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$2,840,581	\$3,060,763	\$220,182	8%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$188,215	\$353,408	\$165,193	88%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	6.63%	11.55%	4.92%	74%
4	DISCHARGES	108	84	(24)	-22%
5	CASE MIX INDEX (CMI)	0.84398	0.93227	0.08829	10%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	91.14984	78.31068	(12.83916)	-14%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,064.90	\$4,512.90	\$2,448.00	119%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$9,010.25	\$5,687.30	(\$3,322.95)	-37%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$6,152.10	\$3,434.02	(\$2,718.08)	-44%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$560,763	\$268,920	(\$291,843)	-52%
11	PATIENT DAYS	682	407	(275)	-40%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$275.98	\$868.32	\$592.35	215%
13	AVERAGE LENGTH OF STAY	6.3	4.8	(1.5)	-23%
	<u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$1,533,842	\$1,654,578	\$120,736	8%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$149,887	\$230,800	\$80,913	54%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	9.77%	13.95%	4.18%	43%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	54.00%	54.06%	0.06%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	58.31727	45.40847	(12.90881)	-22%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,570.20	\$5,082.75	\$2,512.55	98%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$12,352.29	\$9,729.33	(\$2,622.96)	-21%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$4,659.14	\$2,926.60	(\$1,732.54)	-37%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$271,708	\$132,893	(\$138,816)	-51%
	<u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$4,374,423	\$4,715,341	\$340,918	8%
24	TOTAL ACCRUED PAYMENTS	\$338,102	\$584,208	\$246,106	73%
25	TOTAL ALLOWANCES	\$4,036,321	\$4,131,133	\$94,812	2%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$832,472	\$401,813	(\$430,659)	-52%

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)				
	TOTAL MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$91,928,898	\$100,311,907	\$8,383,009	9%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$13,622,148	\$17,702,869	\$4,080,721	30%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	14.82%	17.65%	2.83%	19%
4	DISCHARGES	3,147	3,173	26	1%
5	CASE MIX INDEX (CMI)	0.96906	1.03858	0.06952	7%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	3,049.61634	3,295.41151	245.79517	8%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,466.84	\$5,371.98	\$905.14	20%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$6,608.31	\$4,828.22	(\$1,780.09)	-27%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,750.16	\$2,574.94	(\$1,175.22)	-31%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$11,436,551	\$8,485,492	(\$2,951,059)	-26%
11	PATIENT DAYS	14,568	14,177	(391)	-3%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$935.07	\$1,248.70	\$313.63	34%
13	AVERAGE LENGTH OF STAY	4.6	4.5	(0.2)	-3%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$94,554,086	\$122,151,797	\$27,597,711	29%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$14,794,991	\$19,701,248	\$4,906,257	33%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	15.65%	16.13%	0.48%	3%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	102.86%	121.77%	18.92%	18%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,231.44402	3,872.77639	641.33237	20%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,578.45	\$5,087.11	\$508.67	11%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$10,344.05	\$9,724.97	(\$619.07)	-6%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,650.89	\$2,922.24	\$271.35	10%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$8,566,212	\$11,317,200	\$2,750,988	32%
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$186,482,984	\$222,463,704	\$35,980,720	19%
24	TOTAL ACCRUED PAYMENTS	\$28,417,139	\$37,404,117	\$8,986,978	32%
25	TOTAL ALLOWANCES	\$158,065,845	\$185,059,587	\$26,993,742	17%

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
G.	<u>CHAMPUS / TRICARE</u>				
	<u>CHAMPUS / TRICARE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$1,000,373	\$891,400	(\$108,973)	-11%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$248,767	\$163,645	(\$85,122)	-34%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	24.87%	18.36%	-6.51%	-26%
4	DISCHARGES	16	14	(2)	-13%
5	CASE MIX INDEX (CMI)	1.31450	0.77652	(0.53798)	-41%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	21.03200	10.87128	(10.16072)	-48%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,828.02	\$15,052.97	\$3,224.94	27%
8	PATIENT DAYS	65	61	(4)	-6%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,827.18	\$2,682.70	(\$1,144.48)	-30%
10	AVERAGE LENGTH OF STAY	4.1	4.4	0.3	7%
	<u>CHAMPUS / TRICARE OUTPATIENT</u>				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$656,717	\$825,552	\$168,835	26%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$123,693	\$195,119	\$71,426	58%
	<u>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</u>				
13	TOTAL ACCRUED CHARGES	\$1,657,090	\$1,716,952	\$59,862	4%
14	TOTAL ACCRUED PAYMENTS	\$372,460	\$358,764	(\$13,696)	-4%
15	TOTAL ALLOWANCES	\$1,284,630	\$1,358,188	\$73,558	6%
H.	<u>OTHER DATA</u>				
1	OTHER OPERATING REVENUE	\$24,588,226	\$23,115,000	(\$1,473,226)	-6%
2	TOTAL OPERATING EXPENSES	\$461,480,665	\$482,124,601	\$20,643,936	4%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
	<u>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</u>				
4	CHARITY CARE (CHARGES)	\$27,344,589	\$34,807,823	\$7,463,234	27%
5	BAD DEBTS (CHARGES)	\$46,972,113	\$51,939,073	\$4,966,960	11%
6	UNCOMPENSATED CARE (CHARGES)	\$74,316,702	\$86,746,896	\$12,430,194	17%
7	COST OF UNCOMPENSATED CARE	\$26,183,182	\$24,383,455	(\$1,799,727)	-7%
	<u>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</u>				
8	TOTAL ACCRUED CHARGES	\$186,482,984	\$222,463,704	\$35,980,720	19%
9	TOTAL ACCRUED PAYMENTS	\$28,417,139	\$37,404,117	\$8,986,978	32%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$65,701,489	\$62,531,733	(\$3,169,756)	-5%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$37,284,350	\$25,127,616	(\$12,156,734)	-33%

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
II.	<u>AGGREGATE DATA</u>				
A.	<u>TOTALS - ALL PAYERS</u>				
1	TOTAL INPATIENT CHARGES	\$596,153,309	\$603,986,071	\$7,832,762	1%
2	TOTAL INPATIENT PAYMENTS	\$160,022,808	\$152,619,524	(\$7,403,284)	-5%
3	TOTAL INPATIENT PAYMENTS / CHARGES	26.84%	25.27%	-1.57%	-6%
4	TOTAL DISCHARGES	14,940	14,294	(646)	-4%
5	TOTAL CASE MIX INDEX	1.22626	1.28460	0.05835	5%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	18,320.26361	18,362.12188	41.85827	0%
7	TOTAL OUTPATIENT CHARGES	\$863,179,215	\$1,038,604,437	\$175,425,222	20%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	144.79%	171.96%	27.17%	19%
9	TOTAL OUTPATIENT PAYMENTS	\$267,251,013	\$311,169,533	\$43,918,520	16%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	30.96%	29.96%	-1.00%	-3%
11	TOTAL CHARGES	\$1,459,332,524	\$1,642,590,508	\$183,257,984	13%
12	TOTAL PAYMENTS	\$427,273,821	\$463,789,057	\$36,515,236	9%
13	TOTAL PAYMENTS / TOTAL CHARGES	29.28%	28.24%	-1.04%	-4%
14	PATIENT DAYS	74,442	70,911	(3,531)	-5%
B.	<u>TOTALS - ALL GOVERNMENT PAYERS</u>				
1	INPATIENT CHARGES	\$367,073,801	\$389,793,845	\$22,720,044	6%
2	INPATIENT PAYMENTS	\$79,246,667	\$84,239,604	\$4,992,937	6%
3	GOVT. INPATIENT PAYMENTS / CHARGES	21.59%	21.61%	0.02%	0%
4	DISCHARGES	8,414	8,331	(83)	-1%
5	CASE MIX INDEX	1.31053	1.39939	0.08886	7%
6	CASE MIX ADJUSTED DISCHARGES	11,026.80601	11,658.33839	631.53238	6%
7	OUTPATIENT CHARGES	\$353,861,341	\$443,067,561	\$89,206,220	25%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	96.40%	113.67%	17.27%	18%
9	OUTPATIENT PAYMENTS	\$50,734,462	\$65,593,495	\$14,859,033	29%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	14.34%	14.80%	0.47%	3%
11	TOTAL CHARGES	\$720,935,142	\$832,861,406	\$111,926,264	16%
12	TOTAL PAYMENTS	\$129,981,129	\$149,833,099	\$19,851,970	15%
13	TOTAL PAYMENTS / CHARGES	18.03%	17.99%	-0.04%	0%
14	PATIENT DAYS	47,960	46,259	(1,701)	-4%
15	TOTAL GOVERNMENT DEDUCTIONS	\$590,954,013	\$683,028,307	\$92,074,294	16%
C.	<u>AVERAGE LENGTH OF STAY</u>				
1	MEDICARE	6.3	6.2	(0.1)	-2%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.1	4.1	0.1	2%
3	UNINSURED	3.7	4.7	1.0	28%
4	MEDICAID	4.6	4.5	(0.1)	-2%
5	OTHER MEDICAL ASSISTANCE	6.3	4.8	(1.5)	-23%
6	CHAMPUS / TRICARE	4.1	4.4	0.3	7%
7	TOTAL AVERAGE LENGTH OF STAY	5.0	5.0	(0.0)	0%

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION				
1	TOTAL CHARGES	\$1,459,332,524	\$1,642,590,508	\$183,257,984	13%
2	TOTAL GOVERNMENT DEDUCTIONS	\$590,954,013	\$683,028,307	\$92,074,294	16%
3	UNCOMPENSATED CARE	\$74,316,702	\$86,746,896	\$12,430,194	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$260,850,350	\$387,152,825	\$126,302,475	48%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$19,060,961	\$23,951,070	\$4,890,109	26%
6	TOTAL ADJUSTMENTS	\$945,182,026	\$1,180,879,098	\$235,697,072	25%
7	TOTAL ACCRUED PAYMENTS	\$514,150,498	\$461,711,410	(\$52,439,088)	-10%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMTS.	\$514,150,498	\$461,711,410	(\$52,439,088)	-10%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3523189469	0.2810873482	(0.0712315987)	-20%
11	COST OF UNCOMPENSATED CARE	\$26,183,182	\$24,383,455	(\$1,799,727)	-7%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$37,284,350	\$25,127,616	(\$12,156,734)	-33%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$63,467,532	\$49,511,071	(\$13,956,461)	-22%
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$8,294,504	\$11,184,307	\$2,889,803	35%
2	OTHER MEDICAL ASSISTANCE	\$832,472	\$401,813	(\$430,659)	-52%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$12,115,638	\$13,939,399	\$1,823,761	15%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$21,242,614	\$25,525,520	\$4,282,906	20%
V.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600				
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$28,400,531	\$34,761,420	\$6,360,889	22.40%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$47,985,146	\$41,066,943	(\$6,918,203)	-14.42%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$475,259,000	\$504,856,000	\$29,597,000	6.23%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	(\$508)	(\$508)	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$1,459,333,000	\$1,642,590,000	\$183,257,000	12.56%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$387,740	\$104	(\$387,636)	-99.97%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$74,704,000	\$86,747,000	\$12,043,000	16.12%

STAMFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
I.	ACCRUED CHARGES AND PAYMENTS			
A.	INPATIENT ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$229,079,508	\$214,192,226	(\$14,887,282)
2	MEDICARE	\$274,144,530	288,590,538	\$14,446,008
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$91,928,898	100,311,907	\$8,383,009
4	MEDICAID	\$89,088,317	97,251,144	\$8,162,827
5	OTHER MEDICAL ASSISTANCE	\$2,840,581	3,060,763	\$220,182
6	CHAMPUS / TRICARE	\$1,000,373	891,400	(\$108,973)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$19,215,996	18,193,219	(\$1,022,777)
	TOTAL INPATIENT GOVERNMENT CHARGES	\$367,073,801	\$389,793,845	\$22,720,044
	TOTAL INPATIENT CHARGES	\$596,153,309	\$603,986,071	\$7,832,762
B.	OUTPATIENT ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$509,317,874	\$595,536,876	\$86,219,002
2	MEDICARE	\$258,650,538	320,090,212	\$61,439,674
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$94,554,086	122,151,797	\$27,597,711
4	MEDICAID	\$93,020,244	120,497,219	\$27,476,975
5	OTHER MEDICAL ASSISTANCE	\$1,533,842	1,654,578	\$120,736
6	CHAMPUS / TRICARE	\$656,717	825,552	\$168,835
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$54,022,199	69,865,798	\$15,843,599
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$353,861,341	\$443,067,561	\$89,206,220
	TOTAL OUTPATIENT CHARGES	\$863,179,215	\$1,038,604,437	\$175,425,222
C.	TOTAL ACCRUED CHARGES			
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$738,397,382	\$809,729,102	\$71,331,720
2	TOTAL MEDICARE	\$532,795,068	\$608,680,750	\$75,885,682
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$186,482,984	\$222,463,704	\$35,980,720
4	TOTAL MEDICAID	\$182,108,561	\$217,748,363	\$35,639,802
5	TOTAL OTHER MEDICAL ASSISTANCE	\$4,374,423	\$4,715,341	\$340,918
6	TOTAL CHAMPUS / TRICARE	\$1,657,090	\$1,716,952	\$59,862
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$73,238,195	\$88,059,017	\$14,820,822
	TOTAL GOVERNMENT CHARGES	\$720,935,142	\$832,861,406	\$111,926,264
	TOTAL CHARGES	\$1,459,332,524	\$1,642,590,508	\$183,257,984
D.	INPATIENT ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$80,776,141	\$68,379,920	(\$12,396,221)
2	MEDICARE	\$65,375,752	66,373,090	\$997,338
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$13,622,148	17,702,869	\$4,080,721
4	MEDICAID	\$13,433,933	17,349,461	\$3,915,528
5	OTHER MEDICAL ASSISTANCE	\$188,215	353,408	\$165,193
6	CHAMPUS / TRICARE	\$248,767	163,645	(\$85,122)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$237,449	284,223	\$46,774
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$79,246,667	\$84,239,604	\$4,992,937
	TOTAL INPATIENT PAYMENTS	\$160,022,808	\$152,619,524	(\$7,403,284)
E.	OUTPATIENT ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$216,516,551	\$245,576,038	\$29,059,487
2	MEDICARE	\$35,815,778	45,697,128	\$9,881,350
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,794,991	19,701,248	\$4,906,257
4	MEDICAID	\$14,645,104	19,470,448	\$4,825,344
5	OTHER MEDICAL ASSISTANCE	\$149,887	230,800	\$80,913
6	CHAMPUS / TRICARE	\$123,693	195,119	\$71,426
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,800,846	1,726,343	(\$74,503)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$50,734,462	\$65,593,495	\$14,859,033
	TOTAL OUTPATIENT PAYMENTS	\$267,251,013	\$311,169,533	\$43,918,520
F.	TOTAL ACCRUED PAYMENTS			
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$297,292,692	\$313,955,958	\$16,663,266
2	TOTAL MEDICARE	\$101,191,530	\$112,070,218	\$10,878,688
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$28,417,139	\$37,404,117	\$8,986,978
4	TOTAL MEDICAID	\$28,079,037	\$36,819,909	\$8,740,872
5	TOTAL OTHER MEDICAL ASSISTANCE	\$338,102	\$584,208	\$246,106
6	TOTAL CHAMPUS / TRICARE	\$372,460	\$358,764	(\$13,696)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,038,295	\$2,010,566	(\$27,729)
	TOTAL GOVERNMENT PAYMENTS	\$129,981,129	\$149,833,099	\$19,851,970
	TOTAL PAYMENTS	\$427,273,821	\$463,789,057	\$36,515,236

STAMFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
II.	<u>PAYER MIX</u>			
A.	<u>INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	15.70%	13.04%	-2.66%
2	MEDICARE	18.79%	17.57%	-1.22%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.30%	6.11%	-0.19%
4	MEDICAID	6.10%	5.92%	-0.18%
5	OTHER MEDICAL ASSISTANCE	0.19%	0.19%	-0.01%
6	CHAMPUS / TRICARE	0.07%	0.05%	-0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.32%	1.11%	-0.21%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	25.15%	23.73%	-1.42%
	TOTAL INPATIENT PAYER MIX	40.85%	36.77%	-4.08%
B.	<u>OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	34.90%	36.26%	1.36%
2	MEDICARE	17.72%	19.49%	1.76%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.48%	7.44%	0.96%
4	MEDICAID	6.37%	7.34%	0.96%
5	OTHER MEDICAL ASSISTANCE	0.11%	0.10%	0.00%
6	CHAMPUS / TRICARE	0.05%	0.05%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.70%	4.25%	0.55%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	24.25%	26.97%	2.73%
	TOTAL OUTPATIENT PAYER MIX	59.15%	63.23%	4.08%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	<u>INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	18.91%	14.74%	-4.16%
2	MEDICARE	15.30%	14.31%	-0.99%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.19%	3.82%	0.63%
4	MEDICAID	3.14%	3.74%	0.60%
5	OTHER MEDICAL ASSISTANCE	0.04%	0.08%	0.03%
6	CHAMPUS / TRICARE	0.06%	0.04%	-0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.06%	0.06%	0.01%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	18.55%	18.16%	-0.38%
	TOTAL INPATIENT PAYER MIX	37.45%	32.91%	-4.54%
D.	<u>OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	50.67%	52.95%	2.28%
2	MEDICARE	8.38%	9.85%	1.47%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.46%	4.25%	0.79%
4	MEDICAID	3.43%	4.20%	0.77%
5	OTHER MEDICAL ASSISTANCE	0.04%	0.05%	0.01%
6	CHAMPUS / TRICARE	0.03%	0.04%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.42%	0.37%	-0.05%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	11.87%	14.14%	2.27%
	TOTAL OUTPATIENT PAYER MIX	62.55%	67.09%	4.54%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

STAMFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6,526	5,963	(563)
2	MEDICARE	5,251	5,144	(107)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,147	3,173	26
4	MEDICAID	3,039	3,089	50
5	OTHER MEDICAL ASSISTANCE	108	84	(24)
6	CHAMPUS / TRICARE	16	14	(2)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	479	399	(80)
	TOTAL GOVERNMENT DISCHARGES	8,414	8,331	(83)
	TOTAL DISCHARGES	14,940	14,294	(646)
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	26,482	24,652	(1,830)
2	MEDICARE	33,327	32,021	(1,306)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14,568	14,177	(391)
4	MEDICAID	13,886	13,770	(116)
5	OTHER MEDICAL ASSISTANCE	682	407	(275)
6	CHAMPUS / TRICARE	65	61	(4)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,752	1,874	122
	TOTAL GOVERNMENT PATIENT DAYS	47,960	46,259	(1,701)
	TOTAL PATIENT DAYS	74,442	70,911	(3,531)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	4.1	4.1	0.1
2	MEDICARE	6.3	6.2	(0.1)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.6	4.5	(0.2)
4	MEDICAID	4.6	4.5	(0.1)
5	OTHER MEDICAL ASSISTANCE	6.3	4.8	(1.5)
6	CHAMPUS / TRICARE	4.1	4.4	0.3
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.7	4.7	1.0
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	5.7	5.6	(0.1)
	TOTAL AVERAGE LENGTH OF STAY	5.0	5.0	(0.0)
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.11760	1.12423	0.00663
2	MEDICARE	1.51517	1.62365	0.10848
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.96906	1.03858	0.06952
4	MEDICAID	0.97350	1.04147	0.06797
5	OTHER MEDICAL ASSISTANCE	0.84398	0.93227	0.08829
6	CHAMPUS / TRICARE	1.31450	0.77652	(0.53798)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.12267	1.15985	0.03718
	TOTAL GOVERNMENT CASE MIX INDEX	1.31053	1.39939	0.08886
	TOTAL CASE MIX INDEX	1.22626	1.28460	0.05835
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$635,946,661	\$686,908,665	\$50,962,004
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$375,096,311	\$299,755,840	(\$75,340,471)
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$260,850,350	\$387,152,825	\$126,302,475
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	41.02%	56.36%	15.34%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$28,400,531	\$34,761,420	\$6,360,889
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$19,060,961	\$23,951,070	\$4,890,109
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$27,344,589	\$34,807,823	\$7,463,234
9	BAD DEBTS	\$46,972,113	\$51,939,073	\$4,966,960
10	TOTAL UNCOMPENSATED CARE	\$74,316,702	\$86,746,896	\$12,430,194
11	TOTAL OTHER OPERATING REVENUE	\$635,946,661	\$686,908,665	\$50,962,004
12	TOTAL OPERATING EXPENSES	\$461,480,665	\$482,124,601	\$20,643,936

STAMFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	7,293.45760	6,703.78349	(589.67411)
2	MEDICARE	7,956.15767	8,352.05560	395.89793
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,049.61634	3,295.41151	245.79517
4	MEDICAID	2,958.46650	3,217.10083	258.63433
5	OTHER MEDICAL ASSISTANCE	91.14984	78.31068	(12.83916)
6	CHAMPUS / TRICARE	21.03200	10.87128	(10.16072)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	537.75893	462.78015	(74.97878)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	11,026.80601	11,658.33839	631.53238
	TOTAL CASE MIX ADJUSTED DISCHARGES	18,320.26361	18,362.12188	41.85827
B.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14,509.40974	16,579.43642	2,070.02667
2	MEDICARE	4,954.22606	5,705.46790	751.24184
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,231.44402	3,872.77639	641.33237
4	MEDICAID	3,173.12675	3,827.36793	654.24118
5	OTHER MEDICAL ASSISTANCE	58.31727	45.40847	-12.90881
6	CHAMPUS / TRICARE	10.50355	12.96582	2.46226
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,346.61942	1,532.24415	185.62473
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	8,196.17363	9,591.21011	1,395.03647
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	22,705.58338	26,170.64652	3,465.06314
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,075.15	\$10,200.20	(\$874.95)
2	MEDICARE	\$8,217.00	\$7,946.92	(\$270.08)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,466.84	\$5,371.98	\$905.14
4	MEDICAID	\$4,540.84	\$5,392.89	\$852.04
5	OTHER MEDICAL ASSISTANCE	\$2,064.90	\$4,512.90	\$2,448.00
6	CHAMPUS / TRICARE	\$11,828.02	\$15,052.97	\$3,224.94
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$441.55	\$614.16	\$172.61
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$7,186.73	\$7,225.70	\$38.97
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,734.74	\$8,311.65	(\$423.09)
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$14,922.49	\$14,812.09	(\$110.41)
2	MEDICARE	\$7,229.34	\$8,009.36	\$780.02
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,578.45	\$5,087.11	\$508.67
4	MEDICAID	\$4,615.35	\$5,087.16	\$471.81
5	OTHER MEDICAL ASSISTANCE	\$2,570.20	\$5,082.75	\$2,512.55
6	CHAMPUS / TRICARE	\$11,776.30	\$15,048.73	\$3,272.43
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,337.31	\$1,126.68	(\$210.63)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$6,190.02	\$6,838.92	\$648.90
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$11,770.28	\$11,890.02	\$119.74

STAMFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$8,294,504	\$11,184,307	\$2,889,803
2	OTHER MEDICAL ASSISTANCE	\$832,472	\$401,813	(\$430,659)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$12,115,638	\$13,939,399	\$1,823,761
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$21,242,614	\$25,525,520	\$4,282,906
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$1,459,332,524	\$1,642,590,508	\$183,257,984
2	TOTAL GOVERNMENT DEDUCTIONS	\$590,954,013	\$683,028,307	\$92,074,294
3	UNCOMPENSATED CARE	\$74,316,702	\$86,746,896	\$12,430,194
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$260,850,350	\$387,152,825	\$126,302,475
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$19,060,961	\$23,951,070	\$4,890,109
6	TOTAL ADJUSTMENTS	\$945,182,026	\$1,180,879,098	\$235,697,072
7	TOTAL ACCRUED PAYMENTS	\$514,150,498	\$461,711,410	(\$52,439,088)
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$514,150,498	\$461,711,410	(\$52,439,088)
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3523189469	0.2810873482	(0.0712315987)
11	COST OF UNCOMPENSATED CARE	\$26,183,182	\$24,383,455	(\$1,799,727)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$37,284,350	\$25,127,616	(\$12,156,734)
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$63,467,532	\$49,511,071	(\$13,956,461)
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	35.26%	31.92%	-3.34%
2	MEDICARE	23.85%	23.00%	-0.85%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14.82%	17.65%	2.83%
4	MEDICAID	15.08%	17.84%	2.76%
5	OTHER MEDICAL ASSISTANCE	6.63%	11.55%	4.92%
6	CHAMPUS / TRICARE	24.87%	18.36%	-6.51%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.24%	1.56%	0.33%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	21.59%	21.61%	0.02%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	26.84%	25.27%	-1.57%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	42.51%	41.24%	-1.28%
2	MEDICARE	13.85%	14.28%	0.43%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	15.65%	16.13%	0.48%
4	MEDICAID	15.74%	16.16%	0.41%
5	OTHER MEDICAL ASSISTANCE	9.77%	13.95%	4.18%
6	CHAMPUS / TRICARE	18.84%	23.63%	4.80%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.33%	2.47%	-0.86%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	14.34%	14.80%	0.47%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	30.96%	29.96%	-1.00%

STAMFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$427,273,821	\$463,789,057	\$36,515,236
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$427,273,821	\$463,789,057	\$36,515,236
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$47,985,146	\$41,066,943	(\$6,918,203)
4	CALCULATED NET REVENUE	\$475,258,967	\$504,856,000	\$29,597,033
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$475,259,000	\$504,856,000	\$29,597,000
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$33)	\$0	\$33
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$1,459,332,524	\$1,642,590,508	\$183,257,984
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	(\$508)	(\$508)
	CALCULATED GROSS REVENUE	\$1,459,332,524	\$1,642,590,000	\$183,257,476
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,459,333,000	\$1,642,590,000	\$183,257,000
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$476)	\$0	\$476
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$74,316,702	\$86,746,896	\$12,430,194
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$387,740	\$104	(\$387,636)
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$74,704,442	\$86,747,000	\$12,042,558
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$74,704,000	\$86,747,000	\$12,043,000
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$442	\$0	(\$442)

STAMFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
I.	ACCRUED CHARGES AND PAYMENTS	
A.	INPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$214,192,226
2	MEDICARE	288,590,538
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	100,311,907
4	MEDICAID	97,251,144
5	OTHER MEDICAL ASSISTANCE	3,060,763
6	CHAMPUS / TRICARE	891,400
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	18,193,219
	TOTAL INPATIENT GOVERNMENT CHARGES	\$389,793,845
	TOTAL INPATIENT CHARGES	\$603,986,071
B.	OUTPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$595,536,876
2	MEDICARE	320,090,212
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	122,151,797
4	MEDICAID	120,497,219
5	OTHER MEDICAL ASSISTANCE	1,654,578
6	CHAMPUS / TRICARE	825,552
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	69,865,798
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$443,067,561
	TOTAL OUTPATIENT CHARGES	\$1,038,604,437
C.	TOTAL ACCRUED CHARGES	
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$809,729,102
2	TOTAL GOVERNMENT ACCRUED CHARGES	832,861,406
	TOTAL ACCRUED CHARGES	\$1,642,590,508
D.	INPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$68,379,920
2	MEDICARE	66,373,090
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	17,702,869
4	MEDICAID	17,349,461
5	OTHER MEDICAL ASSISTANCE	353,408
6	CHAMPUS / TRICARE	163,645
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	284,223
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$84,239,604
	TOTAL INPATIENT PAYMENTS	\$152,619,524
E.	OUTPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$245,576,038
2	MEDICARE	45,697,128
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	19,701,248
4	MEDICAID	19,470,448
5	OTHER MEDICAL ASSISTANCE	230,800
6	CHAMPUS / TRICARE	195,119
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,726,343
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$65,593,495
	TOTAL OUTPATIENT PAYMENTS	\$311,169,533
F.	TOTAL ACCRUED PAYMENTS	
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$313,955,958
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	149,833,099
	TOTAL ACCRUED PAYMENTS	\$463,789,057

STAMFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
II.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
A.	ACCRUED DISCHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,963
2	MEDICARE	5,144
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,173
4	MEDICAID	3,089
5	OTHER MEDICAL ASSISTANCE	84
6	CHAMPUS / TRICARE	14
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	399
	TOTAL GOVERNMENT DISCHARGES	8,331
	TOTAL DISCHARGES	14,294
B.	CASE MIX INDEX	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.12423
2	MEDICARE	1.62365
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.03858
4	MEDICAID	1.04147
5	OTHER MEDICAL ASSISTANCE	0.93227
6	CHAMPUS / TRICARE	0.77652
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.15985
	TOTAL GOVERNMENT CASE MIX INDEX	1.39939
	TOTAL CASE MIX INDEX	1.28460
C.	OTHER REQUIRED DATA	
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$686,908,665
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$299,755,840
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$387,152,825
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	56.36%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$34,761,420
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$23,951,070
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$34,807,823
9	BAD DEBTS	\$51,939,073
10	TOTAL UNCOMPENSATED CARE	\$86,746,896
11	TOTAL OTHER OPERATING REVENUE	\$23,115,000
12	TOTAL OPERATING EXPENSES	\$482,124,601

STAMFORD HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	TOTAL ACCRUED PAYMENTS	\$463,789,057
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$463,789,057
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$41,066,943
	CALCULATED NET REVENUE	\$504,856,000
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$504,856,000
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$1,642,590,508
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	(\$508)
	CALCULATED GROSS REVENUE	\$1,642,590,000
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,642,590,000
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$86,746,896
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$104
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$86,747,000
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$86,747,000
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
A.	<u>Hospital Charity Care (from HRS Report 500)</u>				
1	Number of Applicants	1,948	1,818	(130)	-7%
2	Number of Approved Applicants	1,729	1,653	(76)	-4%
3	Total Charges (A)	\$27,344,589	\$34,807,823	\$7,463,234	27%
4	Average Charges	\$15,815	\$21,057	\$5,242	33%
5	Ratio of Cost to Charges (RCC)	0.328852	0.310987	(0.017865)	-5%
6	Total Cost	\$8,992,323	\$10,824,780	\$1,832,458	20%
7	Average Cost	\$5,201	\$6,549	\$1,348	26%
8	Charity Care - Inpatient Charges	\$5,990,419	\$5,834,927	(\$155,492)	-3%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	16,157,365	22,076,477	5,919,112	37%
10	Charity Care - Emergency Department Charges	5,196,805	6,896,419	1,699,614	33%
11	Total Charges (A)	\$27,344,589	\$34,807,823	\$7,463,234	27%
12	Charity Care - Number of Patient Days	857	571	(286)	-33%
13	Charity Care - Number of Discharges	116	139	23	20%
14	Charity Care - Number of Outpatient ED Visits	1,399	1,391	(8)	-1%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	8,124	8,740	616	8%
B.	<u>Hospital Bad Debts (from HRS Report 500)</u>				
1	Bad Debts - Inpatient Services	\$19,365,323	\$17,040,007	(\$2,325,316)	-12%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	14,366,253	18,479,608	4,113,355	29%
3	Bad Debts - Emergency Department	13,240,537	16,419,458	3,178,921	24%
4	Total Bad Debts (A)	\$46,972,113	\$51,939,073	\$4,966,960	11%
C.	<u>Hospital Uncompensated Care (from HRS Report 500)</u>				
1	Charity Care (A)	\$27,344,589	\$34,807,823	\$7,463,234	27%
2	Bad Debts (A)	46,972,113	51,939,073	4,966,960	11%
3	Total Uncompensated Care (A)	\$74,316,702	\$86,746,896	\$12,430,194	17%
4	Uncompensated Care - Inpatient Services	\$25,355,742	\$22,874,934	(\$2,480,808)	-10%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	30,523,618	40,556,085	10,032,467	33%
6	Uncompensated Care - Emergency Department	18,437,342	23,315,877	4,878,535	26%
7	Total Uncompensated Care (A)	\$74,316,702	\$86,746,896	\$12,430,194	17%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

STAMFORD HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012		
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>NON-GOVERNMENT</u>	<u>NON-GOVERNMENT</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
	<u>COMMERCIAL - ALL PAYERS</u>				
1	Total Gross Revenue	\$635,946,661	\$686,908,665	\$50,962,004	8%
2	Total Contractual Allowances	\$260,850,350	\$387,152,825	\$126,302,475	48%
	Total Accrued Payments (A)	\$375,096,311	\$299,755,840	(\$75,340,471)	-20%
	Total Discount Percentage	41.02%	56.36%	15.34%	37%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

STAMFORD HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	ACTUAL FY 2012
A.	<u>Gross and Net Revenue</u>			
1	Inpatient Gross Revenue	\$578,603,475	\$596,153,309	\$603,986,071
2	Outpatient Gross Revenue	\$710,022,246	\$863,179,215	\$1,038,604,437
3	Total Gross Patient Revenue	\$1,288,625,721	\$1,459,332,524	\$1,642,590,508
4	Net Patient Revenue	\$436,167,190	\$475,258,979	\$504,856,844
B.	<u>Total Operating Expenses</u>			
1	Total Operating Expense	\$431,680,034	\$461,480,665	\$482,124,601
C.	<u>Utilization Statistics</u>			
1	Patient Days	76,225	74,442	70,911
2	Discharges	15,089	14,940	14,294
3	Average Length of Stay	5.1	5.0	5.0
4	Equivalent (Adjusted) Patient Days (EPD)	169,763	182,228	192,848
0	Equivalent (Adjusted) Discharges (ED)	33,605	36,572	38,874
D.	<u>Case Mix Statistics</u>			
1	Case Mix Index	1.21219	1.22626	1.28460
2	Case Mix Adjusted Patient Days (CMAPD)	92,399	91,285	91,093
3	Case Mix Adjusted Discharges (CMAD)	18,291	18,320	18,362
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	205,785	223,458	247,734
5	Case Mix Adjusted Equivalent Discharges (CMAED)	40,736	44,846	49,937
E.	<u>Gross Revenue Per Statistic</u>			
1	Total Gross Revenue per Patient Day	\$16,906	\$19,604	\$23,164
2	Total Gross Revenue per Discharge	\$85,402	\$97,680	\$114,915
3	Total Gross Revenue per EPD	\$7,591	\$8,008	\$8,518
4	Total Gross Revenue per ED	\$38,346	\$39,903	\$42,255
5	Total Gross Revenue per CMAEPD	\$6,262	\$6,531	\$6,630
6	Total Gross Revenue per CMAED	\$31,634	\$32,541	\$32,893
7	Inpatient Gross Revenue per EPD	\$3,408	\$3,271	\$3,132
8	Inpatient Gross Revenue per ED	\$17,218	\$16,301	\$15,537

STAMFORD HOSPITAL				
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<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2010</u>	<u>ACTUAL FY 2011</u>	<u>ACTUAL FY 2012</u>
F.	<u>Net Revenue Per Statistic</u>			
1	Net Patient Revenue per Patient Day	\$5,722	\$6,384	\$7,120
2	Net Patient Revenue per Discharge	\$28,906	\$31,811	\$35,319
3	Net Patient Revenue per EPD	\$2,569	\$2,608	\$2,618
4	Net Patient Revenue per ED	\$12,979	\$12,995	\$12,987
5	Net Patient Revenue per CMAEPD	\$2,120	\$2,127	\$2,038
6	Net Patient Revenue per CMAED	\$10,707	\$10,597	\$10,110
G.	<u>Operating Expense Per Statistic</u>			
1	Total Operating Expense per Patient Day	\$5,663	\$6,199	\$6,799
2	Total Operating Expense per Discharge	\$28,609	\$30,889	\$33,729
3	Total Operating Expense per EPD	\$2,543	\$2,532	\$2,500
4	Total Operating Expense per ED	\$12,846	\$12,618	\$12,402
5	Total Operating Expense per CMAEPD	\$2,098	\$2,065	\$1,946
6	Total Operating Expense per CMAED	\$10,597	\$10,290	\$9,655
H.	<u>Nursing Salary and Fringe Benefits Expense</u>			
1	Nursing Salary Expense	\$53,049,747	\$55,671,919	\$55,627,968
2	Nursing Fringe Benefits Expense	\$14,424,232	\$14,949,296	\$15,837,999
3	Total Nursing Salary and Fringe Benefits Expense	\$67,473,979	\$70,621,215	\$71,465,967
I.	<u>Physician Salary and Fringe Expense</u>			
1	Physician Salary Expense	\$17,289,984	\$21,556,196	\$22,560,307
2	Physician Fringe Benefits Expense	\$4,701,148	\$4,771,010	\$6,423,210
3	Total Physician Salary and Fringe Benefits Expense	\$21,991,132	\$26,327,206	\$28,983,517
J.	<u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u>			
1	Non-Nursing, Non-Physician Salary Expense	\$93,025,542	\$95,229,352	\$98,326,147
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$25,356,655	\$29,318,027	\$27,994,721
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$118,382,197	\$124,547,379	\$126,320,868
K.	<u>Total Salary and Fringe Benefits Expense</u>			
1	Total Salary Expense	\$163,365,273	\$172,457,467	\$176,514,422
2	Total Fringe Benefits Expense	\$44,482,035	\$49,038,333	\$50,255,930
3	Total Salary and Fringe Benefits Expense	\$207,847,308	\$221,495,800	\$226,770,352

STAMFORD HOSPITAL				
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FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2010</u>	<u>ACTUAL FY 2011</u>	<u>ACTUAL FY 2012</u>
L.	<u>Total Full Time Equivalent Employees (FTEs)</u>			
1	Total Nursing FTEs	600.9	599.4	589.0
2	Total Physician FTEs	111.2	117.3	117.4
3	Total Non-Nursing, Non-Physician FTEs	1339.7	1372.7	1328.2
4	Total Full Time Equivalent Employees (FTEs)	2,051.8	2,089.4	2,034.6
M.	<u>Nursing Salaries and Fringe Benefits Expense per FTE</u>			
1	Nursing Salary Expense per FTE	\$88,284	\$92,879	\$94,445
2	Nursing Fringe Benefits Expense per FTE	\$24,004	\$24,940	\$26,890
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$112,288	\$117,820	\$121,334
N.	<u>Physician Salary and Fringe Expense per FTE</u>			
1	Physician Salary Expense per FTE	\$155,485	\$183,770	\$192,166
2	Physician Fringe Benefits Expense per FTE	\$42,277	\$40,674	\$54,712
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$197,762	\$224,443	\$246,878
O.	<u>Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</u>			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$69,438	\$69,374	\$74,030
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$18,927	\$21,358	\$21,077
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$88,365	\$90,732	\$95,107
P.	<u>Total Salary and Fringe Benefits Expense per FTE</u>			
1	Total Salary Expense per FTE	\$79,620	\$82,539	\$86,756
2	Total Fringe Benefits Expense per FTE	\$21,680	\$23,470	\$24,701
3	Total Salary and Fringe Benefits Expense per FTE	\$101,300	\$106,009	\$111,457
Q.	<u>Total Salary and Fringe Ben. Expense per Statistic</u>			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,727	\$2,975	\$3,198
2	Total Salary and Fringe Benefits Expense per Discharge	\$13,775	\$14,826	\$15,865
3	Total Salary and Fringe Benefits Expense per EPD	\$1,224	\$1,215	\$1,176
4	Total Salary and Fringe Benefits Expense per ED	\$6,185	\$6,056	\$5,834
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$1,010	\$991	\$915
6	Total Salary and Fringe Benefits Expense per CMAED	\$5,102	\$4,939	\$4,541